



NOTICE OF APPEAL

***This form may be used for general appeals.** Appeal forms for Dangerous or Unsightly, Residential Occupancy Conditions (By-law M-200) or Regulations of Taxis and Licenses (By-law T-1000) can be found on the Standing Committee’s homepage at

<http://www.halifax.ca/city-hall/standing-committees/appeals-standing-committee>

I _____ wish to file this Written Notice of Appeal in relation to the following decision _____

*If applicable provide the Case Number _____

The reason for appeal is:

*Hearings of the Appeals Standing Committee are open to the public and any information, including personal information, which is provided or obtained in relation to your appeal, will be a matter of public record.

DATED at _____, Nova Scotia this _____ day of _____, 20____.

Legal Name of Appellant (please print)

Signature of Appellant

Preferred Name

(Address) (Apt)

(City) (Postal Code)

Contact Number or Email

SEND TO:
Office of the Municipal Clerk
P.O. Box 1749
Halifax, NS B3J 3A5
Fax: 902-490-4208
Email: clerks@halifax.ca

Deliver in person: City Hall, 1841 Argyle Street, Halifax (Mon-Fri, 8:30am-4:30pm)