

**PROPERTY STANDARDS BY-LAW
NOTICE OF APPEAL**

The Notice of Appeal Form must be received on or before 5:00 p.m. on the final date for appeal, with a copy of the Order and **non-refundable** administration fee. Send by **registered mail** or deliver to: City of Kitchener, Legislated Services, Attention: Property Standards Appeal Committee Secretary, 200 King St. W., Kitchener, ON N2G 4G7. Appeals received after the date of appeal listed on the Order to Comply will not be processed, not heard by the Committee and the fee will be returned to the Appellant.

APPELLANT INFORMATION

| | | |
|--------------------|----------------|--------------|
| Name of Appellant: | | |
| Street Address: | | |
| City or Town: | Province: | Postal Code: |
| Phone Number: | Email Address: | |

ORDER TO COMPLY APPEAL INFORMATION

| | |
|---|---|
| Property Address: | |
| Order No. (e.g. 17 123456 PI): | Issue Date: |
| Property Owner/Occupant: | |
| Agent (If any): (If any, please fill out the <i>Authorization to Act as an Agent for Appeal</i> form attached) | |
| Appeal Deadline on Order: | <input type="checkbox"/> A copy of the Order to Comply is attached to this Notice of Appeal, as required. |

BRIEFLY EXPLAIN THE REASON(S) FOR YOUR APPEAL

| | |
|---|--|
| <input type="checkbox"/> I am requesting an extension of time to comply with the Order | <input type="checkbox"/> I disagree with the order (modify or quash the Order) |
| | |
| <input type="checkbox"/> I am submitting additional documentation (e.g. photos, written documents) attached to this Notice of Appeal. | |

| | |
|----------------------------------|-------------|
| Signature: _____ | Date: _____ |
| Property Owner/Occupier or Agent | |

OFFICE USE ONLY

| | |
|-----------------------------------|---|
| Date Notice of Appeal received: | Notice of Appeal received by: |
| <input type="checkbox"/> Accepted | <input type="checkbox"/> Incomplete <input type="checkbox"/> Refused |
| Reason for refusal: | |
| Date of Hearing: | Notice of Appeal forwarded to: <input type="checkbox"/> By-Law <input type="checkbox"/> Legal |

Notice: Please note a public agenda will be posted indicating the residential address listed on the Order to Comply. The personal information in relation to this form is collected under the authority s. 28(2) of Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) and will be used by the City of Kitchener to process appeals. If you have any questions regarding this collection of personal information, you can contact the Secretary of the Property Standards Committee at 519-741-2200 ext. 7275 or email address clerks@kitchener.ca.



**PROPERTY STANDARDS BY-LAW
AUTHORIZATION TO ACT AS AN AGENT FOR APPEAL**

Only authorized agents by signature of the property owner/occupant prior to the Hearing may address the City of Kitchener Property Standards Appeal Committee on behalf of the subject property. Send by mail or deliver to: City of Kitchener, Legislated Services, Attention: Property Standards Appeal Committee Secretary, 200 King St. W., Kitchener, ON N2G 4G7.

IF THE PROPERTY OWNER/OCCUPANT IS AN INDIVIDUAL

I/We, _____ **[insert name(s) of owner(s)/occupant(s)]**, the owner(s)/occupant(s) of _____ **[insert address of property]** authorize _____ **[insert name of agent]** to act as my/our agent for the purposes of the appeal of Order _____ **[insert Order number]**, dated _____ **[insert issue date]** to the City of Kitchener Property Standards Appeal Committee.

Agent Mailing Address:

Street: _____

City or Town: _____ Postal Code: _____

Agent Phone Number: _____ Agent Email: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

IF THE PROPERTY OWNER/OCCUPANT IS A CORPORATION

On behalf of, _____ **[insert name of the corporation]**, which owns/occupies _____ **[insert address of property]**, I, _____ **[insert name of person authorized to bind the corporation]**, authorize _____ **[insert name of agent]** to act as the corporation's agent for the purposes of the appeal of Order _____ **[insert Order number]**, dated _____ **[insert issue date]** to the City of Kitchener Property Standards Appeal Committee.

Corporation Name: _____

Corporation Mailing Address:

Street: _____

City or Town: _____ Postal Code: _____

Agent Phone Number: _____ Agent Email: _____

Signature: _____ Date: _____

Position: _____

I have authority to bind the corporation.