



**Secretary
Subdivision & Development Appeal Board
Notice of Development Appeal**

Applicant's Information

*Name of Applicant: _____ *Application Date: _____

*Mailing Address: _____ *Phone (Daytime): _____

*City: _____ Phone (Alternative): _____

*Postal Code: _____

Instructions: Fields that have an asterisk (*) must be provided.

To: The Secretary,
Town of Beaverlodge
Subdivision & Development Appeal Board
Box 30
Beaverlodge, AB T0H 0C0

*I: / We:

*Applicant Status: Applicant for Development Permit

Person affected by an order, decision or Development Permit

*Hereby give Notice of Development Appeal for the following reasons:

(If you need more space, use back of the form).

The land affected by this Development Appeal is:

*Lot (s): _____ *Block: _____ *Plan: _____

*Municipal address or location: _____

For Office Use Only: Application Fee: \$550.00 Appeal #: _____ Receipt: _____ Date Received: _____

*Date: _____

*Signature(s) of Appellant(s)