

# NOTICE OF DEVELOPMENT APPEAL



Development Permit No:

Date:

Name(s) of Appellant:

Name of Agent (if different from Appellant):

Mailing Address:

Mailing Address:

Telephone Number:

Telephone Number:

Legal Description: Lot      Block      Plan  
AND/OR Quarter      Section      Twp      Range      Meridian

Reasons for the appeal including the issues in the decision or the conditions imposed in the approval that is subject to the appeal: (attachments included YES      NO      )

Signature(s):

Important Information: This form, supporting documentation, and appeal fee of \$50.00 must be forwarded to:

**Secretary, R. M. of Sherwood No. 159 Development Appeals Board,  
4400 Campbell Street, P.O. Box 40029 Grasslands PO  
Regina SK S4W 0L3**

Your appeal must be filed within thirty (30) days of the receipt of the written decision of the Development. If you provide a written submission, the information that you provide may be made public, subject to the provisions of the *Freedom of Information and Protection of Privacy Act*.