

In accordance with Sections 678 and 686 of the Municipal Government Act and The City of Calgary Bylaw 25P95, as amended, an appeal to the Subdivision and Development Appeal Board must be filed within the legislated time frame and each Notice of Appeal must be accompanied by the legislated fee. For filing instructions and fee payment options, see the reverse side of this form.

ISC: Unrestricted

| Online Store Information | | | |
|---|---------------------------------|---|-------------------------------------|
| Confirmation Number 10002127 | Order Number 7424953 | Online Form Processed 10/15/2014 8:08:56 PM | |
| Site Information | | | |
| Municipal Address of Site Under Appeal 2509 ERLTON STREET SW | | Development Permit/Subdivision Application/File Number DP2014-2738 | |
| Appellant Information | | | |
| Name of Appellant ERLTON COMMUNITY ASSOCIATION | | Agent Name (if applicable) BILL FISCHER | |
| Street Address (for notification purposes) 65 - 31 AVENUE SW | | | |
| City CALGARY | Province ALBERTA | Postal Code T2S 2Y7 | Residential Phone # 403-266-2842 |
| Business Phone # | Email Address erlton@shaw.ca | | |

APPEAL AGAINST

| Development Permit | Subdivision Application | Notice of Order |
|---|---|--|
| <input checked="" type="checkbox"/> Approval | <input type="checkbox"/> Approval | <input type="checkbox"/> Notice of Order |
| <input type="checkbox"/> Conditions of Approval | <input type="checkbox"/> Conditions of Approval | |
| <input type="checkbox"/> Refusal | <input type="checkbox"/> Refusal | |

REASONS FOR APPEAL Sections 678 and 686 of the Municipal Government Act require that the written Notice of Appeal must contain specific reasons for the appeal.

I do hereby appeal the decision of the Subdivision/Development Authority for the following reasons:

1. The relaxations of the Land Use Bylaw Sections 59(2) (floodway setback), 435 (front setback), and 438 (height) negatively impact our community and the streetscape. 2. Other reasons that may arise at the hearing.

In order to assist the Board in scheduling, please answer the following questions to the best of your ability:

| | |
|---|---|
| Estimated presentation time (minutes/hours) 30 MINUTES | Will you be using an agent/legal counsel? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown |
| Do you anticipate any preliminary issues with your appeal? (i.e. jurisdiction, parties status as affected persons, adjournment, etc.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown | |
| If yes, what are the issues? | |
| Do you anticipate bringing any witnesses/experts to your hearing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown | If yes, how many will you be bringing? |

This personal information is collected under the authority of the Freedom of Information and Protection of Privacy Act, Section 33(c) and the Municipal Government Act, Sections 678 and 686. NOTE: THIS INFORMATION WILL FORM PART OF A FILE AVAILABLE TO THE PUBLIC. If you have any questions regarding the collection of this information, contact the City Appeal Boards at 403-268-5312 or PO Box 2100 Stn. "M", #8110, Calgary, AB, T2P 2M5.

| FOR OFFICE USE ONLY | | | | |
|------------------------------------|--------------------|--|----------------------------|---------------|
| Final Date of Appeal YYYY MM DD | SDAB Appeal Number | Fee Paid <input type="checkbox"/> Yes <input type="checkbox"/> No | Hearing Date YYYY MM DD | Date Received |