

## Notice of Appeal to Tribunal from the Court of Revision

Drainage Act, R.S.O. 1990, c. D.17, subs. 54(1)

To: The Council of the Corporation of the Town	of The Blue Mountains		
Re: The Blue Mountain Outlet Diversion Drain and F		Law #2022-74	
	(Name of Drain)		
Take notice that I/we, appellant(s) to the Court of Revi Tribunal from (check one):	ision, appeal to the Agriculture, Food and R	Rural Affairs Appeal	
▼ The decision of the Court of Revision dated     □	2023/04/11 Date (yyyy/mm/dd)		
The omission, neglect or refusal of the Court of	Revision to hear or decide an appeal		
Details of application and relief being sought from Tribuna	al (attach additional pages if needed):		
The assessment levied against the subject property unreasonable. We believe that this assessment sho to this water course. We receive no benefit from this becoming a municipal drain for the benefit of the dev	ould be reduced to \$100 due to the fact we s watercourse and we are opposed to our	e have limited drainage	
Property Owners Appealing to Tribunal	Application of the second of t		
<ul> <li>Your municipal property tax bill will provide the property</li> </ul>	y description and parcel roll number.		
<ul> <li>In rural areas, the property description should be in the</li> </ul>	form of (part) lot and concession and civic add	dress.	
<ul> <li>In urban areas, the property description should be in th</li> </ul>	e form of street address and lot and plan numb	ber, if available.	
If appealing to Tribunal regarding multiple properties, a	attach additional page with property information	1.	
Property Description 213-Lakeshore Rd., East, The Blue Mountains, ON.,	, L9Y 0M9, Plan 529 PT LOT 174 RP, 16R	R3841 Part 2	
Ward or Geographic Township	Parcel Roll Number 4242-000-003-36801-0000		
If property is owned in partnership, all partners must be list and the name and corporate position of the authorized off Partnership			
Partnership (Each partner in the partnership must complete the	his section).		
Name (Last Name, First Name)	Signature	Date (yyyy/mm/dd)	
Alison Kay		2023/05/02	
Bernard Oegema		2023/05/02	

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Enter the mailing appress a	and ormany contact information of on	rier, marer heimal	
Ka,		First Name Alison	Micde Intal C
Current Address			
Unit Number Street	Road Nomber Commonweller	ĺ	PO Box
Qry/Toen		Province Ontario	Postal Code
Telephone Number	Cell Phone Number (Optional)	Email Address (Optional)	
To be completed by reaple	nt municipality		
Notice filed this 2nd d	20 d May 20 23		$\sim$
Name of Clerk Last Name	First Name)	Signature of Clerk	1.0
GILES, COR	RINA TOWN CLERK		
Timeline for Appeal: This	notice of appeal must be served with Act. R.S.O. 1990.c. D.17, subs. 54(1	in twenty-one days of the pronounce	ment of the decision of the