

**Ontario Land Tribunal**

655 Bay Street, Suite 1500, Toronto, ON M5G 1E5

Tel: 416 212-6349 | 1 866 448-2248

Web Site: olt.gov.on.ca

**Request for Lower Fee**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Instructions:**   * This form can be used to request a reduction of OLT’s appeal fee. * Prepare this form and submit with your Appeal Form at the time of filing your appeal. * Note: An appeal fee reduction may **only** be requested if the appeal fee for the matter you are appealing is $1,100 AND you are a private citizen, a registered charity or a non-profit ratepayers’ association. * This form is to request the appeal fee be reduced to $400. * Please submit $400 appeal fee with your appeal. If your request is denied you will be required to pay the balance owing. | | | | | | | | | | | | | | | | | |  | **Date Stamp - Received by OLT** | | | |
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| **Appeal Information** | | | | | | | | | | | | | | | | | | | | | | |
| Municipal File Number: | | | | | Appeal Type (*Official Plan Amendment, Zoning By-law, Development Charges, etc.)* | | | | | | | | | | | | Date of Municipal Decision: | | | | | |
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| Address and/or Legal Description of Property Subject to the Appeal: | | | | | | | | | | | | | | | | | | | | | | |
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| Municipality: | | | | | | | | | | Upper Tier (Region, County, District): | | | | | | | Date Appeal Filed: | | | | | |
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| **Requester Information** | | | | | | | | | | | | | | | | | | | | | | |
| Last Name: | | | | | | | | | | | | | First Name: | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | |
| Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation): | | | | | | | | | | | | | | | | | | | | | | |
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| Email Address: | | |  | | | | | | | | | | | | | | | | | | | |
| Daytime Telephone Number: | | | | | | | | | | | | Alternative Telephone Number: | | | | | | | | | | |
|  | | | | Ext. | | |  | | | | |  | | | | | | | | | | |
| **Mailing Address** | | | | | | | | | | | | | | | | | | | | | | |
| Unit Number: | | | Street Number: | | | | | | | | | Street Name: | | | | | | | | | P.O. Box | |
|  | | |  | | | | | | | | |  | | | | | | | | |  | |
| City/Town: | | | | | | | | Province: | | | | | | | | Country: | | | | Postal Code: | | |
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| **Reasons to Reduce Fee** | | | | | | | | | | | | | | | | | | | | | | |
| **I am seeking a reduction to the appeal fee on the basis that I am filing the appeal as or on behalf of:** | | | | | | | | | | | | | | | | | | | | | | |
|  | A private citizen | | | | | | | | | | | | | | | | | | | | | |
|  | A registered charity | | | | | | | | | | | | | | | | | | | | | |
|  | A non-profit ratepayers’ association | | | | | | | | | | | | | | | | | | | | | |
| ***If filing on behalf of a registered charity or non-profit ratepayers’ association*** | | | | | | | | | | | | | | | | | | | | | | |
| The name of the charity/non-profit is: | | | | | | | | | | |  | | | | | | | | | | | |
| My relation to the charity/non-profit is: | | | | | | | | | | |  | | | | | | | | | | | |
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| **Affirmation** | | | | | | | | | | | | | | | | | | | | | | |
| **I affirm the above information is accurate to the best of my knowledge and that I have authority to act on behalf of the charity/non-profit (if filing on behalf of either).** | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **Signature** | | | | | | | | | | | |  | **Date** | | | | | | |  |
| **Name of Person Signing:** | | | | | | | | |  | | | | | | | | | | | | |  |
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| Personal information or documentation requested on this form is collected under the authority of the [*Ontario Land Tribunal Act*](https://www.ontario.ca/laws/statute/21o04) and the legislation under which the proceeding is commenced. All information collected is included in the Ontario Land Tribunal (OLT) case file and the public record in this proceeding. In accordance with the [*Freedom of Information and Protection of Privacy Act*](https://www.ontario.ca/laws/statute/90f31) and [section 9 of the *Statutory Powers Procedure Act*](https://www.ontario.ca/laws/statute/90s22#BK23), all information collected is available to the public subject to limited exceptions. |
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| We are committed to providing services as set out in the [*Accessibility for Ontarians with Disabilities Act, 2005*](https://www.ontario.ca/laws/statute/05a11). If you have any accessibility needs, please contact our Accessibility Coordinator at [OLT.Coordinator@ontario.ca](mailto:OLT.Coordinator@ontario.ca) or toll free at 1-866-448-2248 as soon as possible. |

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| **OFFICE USE ONLY** | | | | | | | | |
| Request Received by: | | |  | | Date Received (dd/mm/yyyy): | |  |  |
| Fee Received: | $ |  | | Reviewed By: |  |  | | |
|  | | | | | | | | |