

**Development Services Division**

Town of Huntsville
37 Main Street East
Huntsville, ON P1H 1A1
Tel: 705-789-1751
www.huntsville.ca

APPLICATION TO APPEAL TO THE APPEALS COMMITTEE

A person who wishes to appeal the decision of the Manager to refuse a license (new, renewal or revocation) shall file this complete application **within 14 days** of the Departments decision. As per By-law 2025-13, as amended, all decisions of the Appeals Committee are final.

Required Documentation

- License Committee Appeal Fee: \$300
Please make payment by cheque to "The Corporation of the Town of Huntsville"; and

Attached Municipal letter of denial or
comment provided in Cloudpermit
application.

Additional Documentation

- You may provide additional documentation in support of your appeal to the Municipal Licensing or Bylaws

Note: Excluding this application form, any additional documentation submitted will be forwarded to the Municipal Appeals Committee and, therefore, will become part of the public record.

REASON TO ADDRESS THE LICENSING COMMITTEE

- | | |
|--|---|
| <input type="checkbox"/> Refusal of a Business License | <input type="checkbox"/> Exemption to the Discharge Firearms Bylaw |
| <input type="checkbox"/> Revocation of a Business License | <input type="checkbox"/> Exemption to the Business Licensing Bylaw |
| <input type="checkbox"/> Refusal of Vehicle for Hire License | <input type="checkbox"/> Exemption to the Noise Bylaw |
| <input type="checkbox"/> Revocation of Vehicle for Hire License | <input type="checkbox"/> Exemption to the Sign Bylaw |
| <input type="checkbox"/> Appeal for Property Standards Order | <input type="checkbox"/> Exemption to Control and Licensing of Dogs Bylaw |
| <input type="checkbox"/> Refusal of the issuance of the STRA License | <input type="checkbox"/> Exemption to the Exotic Pet Bylaw |
| <input type="checkbox"/> Revocation of the STRA License | |

A. Property Information (Property to be Licensed)

Building number, street name	Unit number	Lot/con.
Postal code	Plan number/other description	

B. Owner Information

Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()	Cell number ()	

C. Declaration of Owner

I _____ certify that:
(print name)

1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

Date

Signature of applicant

For use by Principal Authority

Application number:	License number (if different):
Date received:	Roll number:
Date License Refused or Committee Decision:	Received by: