

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

<b>TO:</b>	<b>CHAIR AND MEMBERS PLANNING &amp; ENVIRONMENT COMMITTEE</b>
<b>FROM:</b>	<b>JOHN M. FLEMING MANAGING DIRECTOR, PLANNING AND CITY PLANNER</b>
<b>SUBJECT:</b>	<b>APPLICATION BY: THE CITY OF LONDON NEAR CAMPUS NEIGHBOURHOODS PLANNING AMENDMENTS NOTICE OF APPEAL TO THE ONTARIO MUNICIPAL BOARD MEETING ON MONDAY, NOVEMBER 26, 2012</b>

<b>RECOMMENDATION</b>
-----------------------

That, on the recommendation of the Managing Director, Planning and City Planner, in response to the letters of appeal to the Ontario Municipal Board, dated August 21, 2012 and August 24, 2012 and submitted by Barry Card (on behalf of Arnon Kaplansky), Brian Toth, Jon Leahy (Escalade Property Corp), and Twee Brown (Adamas Group) relating to applications for amendments to the Official Plan and Zoning By-law No. Z.-1 which were passed by Municipal Council concerning lands generally bounded by Fanshawe Park Road/Thames River (North Branch)/Kilally Road to the north, Aldersbrook Road/Wonderland Road to the west, the Thames River (South Branch)/Dundas Street to the south, and Clark Road to the east as well as City-wide changes to various Zoning regulations, the Ontario Municipal Board **BE ADVISED** that the Municipal Council has reviewed its decision relating to this matter and sees no reason to alter it.

<b>PREVIOUS REPORTS PERTINENT TO THIS MATTER</b>
--

December 2007 – Report to Town and Gown Committee – Town and Gown Initiatives. This report identified efforts that have already been made in London by the University, Colleges, Student Councils, Neighbourhood Groups, London Police, London Fire, By-law Enforcement, and Planning and Development to address Town and Gown issues.

February 2008 – Report to Planning Committee – Closing the Gap: New Partnerships for Great Neighbourhoods Surrounding our University and Colleges – This report to Planning Committee proposed 10 strategic initiatives designed to collectively achieve the common vision for the Near-Campus Neighbourhoods.

November 2008 – Report to Planning Committee – Great Near-Campus Neighbourhoods Strategy Implementation Plan – This report to Planning Committee re-branded the “Closing the Gap” initiative to “Great Near-Campus Neighbourhoods Strategy” and recommended that the proposed Plan to implement the Great Near-Campus Neighbourhoods Strategy be adopted.

September 2009 – Report to Planning Committee –Near-Campus Neighbourhoods Planning Amendments – This report to Planning Committee recommended that the draft Official Plan and Zoning By-law amendments be circulated for public and agency review and that public meetings be held with local stakeholders to review the draft amendments. Based on the feedback, Planning Staff forwarded a report to Planning Committee for further consideration and approval.

June 2012 – Report to Planning and Environment Committee –Near-Campus Neighbourhoods Planning Amendments – This report to the Planning and Environment Committee recommended that the proposed Official Plan and Zoning By-law amendments that were modified based on public feedback from the September 2009 circulation be adopted.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

**PURPOSE AND EFFECT OF RECOMMENDED ACTION**

The recommended action would advise the OMB that Municipal Council is in agreement with their previous decision on July 24, 2012 to approve the amendments to the Official Plan and Zoning By-law which provide clearer guidance for the development of lands in near-campus neighbourhoods located in proximity to the University of Western Ontario and Fanshawe College described above.

**BACKGROUND**

On March 3, 2008, Staff prepared and presented a report to Council related to land use impacts in the neighbourhoods in proximity to Western University and Fanshawe College. This report also presented a consolidated vision for near-campus neighbourhoods, based on the extensive feedback received through the research and consultation process, and identified 10 strategies for achieving the vision. Council asked that the report be circulated to various stakeholders and interested parties for review.

Following the circulation of the report, Staff from the Department of Planning and Development held public information sessions for students, neighbours, landlords, school administration, and others to present these 10 strategies and to solicit their feedback.

In November 2008, Staff reported back to Planning Committee to present the results of the public consultation sessions. As part of this report, Staff rebranded the *Closing the Gap* strategy to the *Great Near-Campus Neighbourhoods Strategy* and introduced an implementation plan which outlined “how” and “when” the 10 strategies will be implemented and by “whom”. On November 17, 2008 Council adopted the 10 strategies outlined in the *Great Near-Campus Neighbourhoods Strategy* and accompanying Implementation Plan.

Upon adoption, Planning Staff began to draft Official Plan and Zoning By-law amendments consistent with several of the initiatives identified in the Implementation Plan adopted by Council. A draft set of Official Plan, Zoning By-law, and Site Plan By-law amendments were presented at a meeting of the Planning Committee on September 28, 2009 with a recommendation that the proposed amendments be circulated to:

- the Town and Gown Committee
- the London Housing Advisory Committee
- the Urban League of London
- the London Developers Institute
- the London Home Builders Association, and
- the London Area Planning Consultants

In addition to the above recommendations, on October 5, 2009 Council also resolved that the draft near-campus neighbourhoods planning amendments be circulated to various stakeholders and interested parties for comments and feedback prior to presenting the proposed amendments to Council for adoption. As a result of the recommendation to circulate the proposed policies, Planning Staff held several more information sessions and presented to various community associations to provide information and solicit feedback.

Public consultation sessions were held at King’s College, Fanshawe College, and Council Chambers in November 2009 and another public information session in Council Chambers in March 2010. Planning Staff also attended local community association meetings upon request and presented at a meeting of the London Property Management Association (LPMA) in May 2010 to provide information and solicit feedback. The proposed amendments were also circulated to internal and external agencies for comment. Staff modified the final recommendations and proposed amendments based on input received during the public

Agenda Item #	Page #

**M. Tomazincic**  
**File #OZ-7663**

consultation sessions and presented these to recommendations to the Planning and Environment Committee.

During the statutory public participation meeting on June 18, 2012, the Planning and Environment Committee (PEC) heard concerns from the London Development Institute and London Home Builders Association related to the potential for negative impacts on new residential development in areas outside of the Near-Campus Neighbourhoods as a result of the proposed reduction in the maximum height from 10.5 metres to 9.0 metres in areas zoned Residential R1, R2, and R3. Therefore, Council approved the recommended amendments with the exception of the Zoning By-law regulations pertaining to a reduction in building heights.

On August 21, 2012 and August 24, 2012 appeals were submitted by Barry Card (on behalf of Arnon Kaplansky), Brian Toth, Jon Leahy (Escalade Property Corp), and Twee Brown (Adamas Group).

Copies of the appeal letters and the reasons for the appeals are attached as appendices "A", "B", "C", "D", "E", "F", "G", and "H" to this report. A date for the Ontario Municipal Board hearing has not yet been scheduled. Planning Staff have reviewed the appeal letters and see no reason for Council to alter its decision relating to this matter.

<b>PREPARED BY:</b>	<b>SUBMITTED BY:</b>
<b>MICHAEL TOMAZINCIC, MCIP, RPP MANAGER, PLANNING REVIEW</b>	<b>JIM YANCHULA, MCIP, RPP MANAGER, COMMUNITY PLANNING AND DESIGN</b>
<b>RECOMMENDED BY:</b>	
<b>JOHN M. FLEMING, MCIP, RPP MANAGING DIRECTOR, PLANNING AND CITY PLANNER</b>	

November 21, 2012  
MT/mt

Y:/shared/implemen/DEVELOPMENT APPS/2009 Applications 7630 to/7663OZ - Near Campus Neighbourhoods (MT)/7663OZ - OMB Report

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "A"

**Barry R. Card**

2012-D11-02

BARRISTER & SOLICITOR  
Certified Specialist - Municipal Law: Local Government/ Land Use Planning & Development Law  
568 RIDGEWOOD CRESCENT  
LONDON, ONTARIO N6J 3J2  
TELEPHONE (519) 433-5117 • FACSIMILE (519) 963-0285

Internet Address: [cardlaw@rogers.com](mailto:cardlaw@rogers.com)

August 21, 2012

**DELIVERED**

Catharine Saunders, City Clerk  
Corporation of the City of London  
City Hall, 3<sup>rd</sup> Floor  
300 Dufferin Avenue  
London, Ontario  
N6B 1Z2

City Clerk No. 2800  
Subject Notice of Appeal - OPA  
No. 535 - Near-Campus  
Neighbourhoods Area - Arnon  
AUG 21 2012  
Kaplansky - OZ-7663  
Ref. Wetherill, JPB, Fleming  
C.C. Grotzilas, Minnis, Barrett,  
Ramsay, Marchula, Amacphoen,  
Leunissen, Henry, Saunders

Dear Ms. Saunders:

**Re: Notices of Appeal  
Official Plan Amendment No. 535 and Zoning By-law Z.-1-122125  
Near-Campus Neighbourhoods Area  
Arnon Kaplansky**

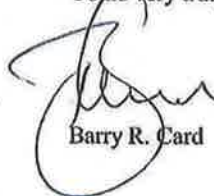
SCANNED TO ALL  
DATE: Aug 21/12  
ms

I am the solicitor for Arnon Kaplansky and enclose the following:

1. Appeal of OPA No. 535 (Appellant Form) and certified cheque in the sum of \$125.00; and
2. Appeal of Zoning By-law No. Z.-1-122125 (Appellant Form) and certified cheque in the sum of \$125.00.

If anything further is required to permit the City to forward these appeals to the Board, please let me know.

Yours very truly,



Barry R. Card

BRC:jmh  
Encls.

Agenda Item #	Page #
---------------	--------

M. Tomazincic  
File #OZ-7663

APPENDIX "A"



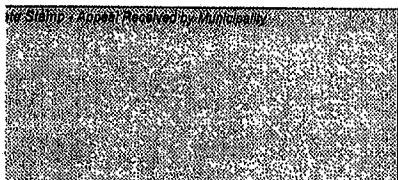
Environment and Land Tribunals Ontario  
**Ontario Municipal Board**  
655 Bay Street, Suite 1800 Toronto, Ontario M5G 1E5  
TEL: (416) 212-6349 or Toll Free: 1-866-448-2248  
FAX: (416) 328-5370  
www.elt.o.gov.on.ca

**FORM**

**APPELLANT FORM (A1)  
PLANNING ACT**

**SUBMIT COMPLETED**

**TO  
MUNICIPALITY/APPROVAL  
AUTHORITY**



**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Minor Variance	<input type="checkbox"/> Appeal a decision	45(12)
Consent/Severance	<input type="checkbox"/> Appeal a decision	53(19)
	<input type="checkbox"/> Appeal conditions imposed	
	<input type="checkbox"/> Appeal changed conditions	53(27)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	53(14)
Zoning By-law or Zoning By-law Amendment	<input checked="" type="checkbox"/> Appeal the passing of a Zoning By-law	34(19)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	34(11)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	
Interim Control By-law	<input type="checkbox"/> Appeal the passing of an Interim Control By-law	38(4)
Official Plan or Official Plan Amendment	<input type="checkbox"/> Appeal a decision	17(24) or 17(36)
	<input type="checkbox"/> Failed to make a decision on the plan within 180 days	17(40)
	<input type="checkbox"/> Application for an amendment to the Official Plan – failed to make a decision on the application within 180 days	22(7)
	<input type="checkbox"/> Application for an amendment to the Official Plan – refused by the municipality	
Plan of Subdivision	<input type="checkbox"/> Appeal a decision	51(39)
	<input type="checkbox"/> Appeal conditions imposed	51(43) or 51(48)
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	51(34)

**Part 2: Location Information**

186-188 Huron Street & 2 Audrey Street; 86 Cartwright Street; 754 Maitland Street

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "A"

Address and/or Legal Description of property subject to the appeal:

Municipality/Upper tier: City of London

**Part 3: Appellant Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Arnon Kaplansky on behalf of KAP Holdings Inc., Kapland Construction Inc. and Kapland Inc.,  
c/o Barry R. Card, Barrister and Solicitor

Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation)

Professional Title (if applicable): \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Mailing Address: 568 Ridgewood Crescent London

Street Address Apt/Suite/Unit# City/Town

Ontario N6J 3J2

Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: August 21, 2012

*(Signature not required if the appeal is submitted by a law office.)*

**Barry R. Card**

**Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.**

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 28 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

**Part 4: Representative Information (if applicable)**

**I hereby authorize the named company and/or individual(s) to represent me:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Professional Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street Address Apt/Suite/Unit# City/Town

Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: \_\_\_\_\_

*Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.*

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "A"

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Provide specific information about what you are appealing. For example: Municipal File Number(s), By-law Number(s), Official Plan Number(s) or Subdivision Number(s):

(Please print)

Zoning By-law No. Z.-1-122125, City of London re Near-Campus Neighbourhoods Area.  
Municipal File No. OZ-7663

2. Outline the nature of your appeal and the reasons for your appeal. Be specific and provide land-use planning reasons (for example: the specific provisions, sections and/or policies of the Official Plan or By-law which are the subject of your appeal - if applicable). \*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)

1. The Appellant appeals the passing of Zoning By-law Z.-1-122125 as it applies to its properties at 186-188 Huron Street & 2 Audrey Street, 86 Cartwright Street and 754 Maitland Street.
2. The Zoning By-law Amendment constitutes an unjustified impediment to meritorious intensification.
3. The PPS aims to encourage intensification and cost-effective development standards that facilitate intensification. The proposed ZBA is not consistent with these Provincial policies.

**THE FOLLOWING SECTIONS (a&b) APPLY ONLY TO APPEALS OF ZONING BY-LAW AMENDMENTS UNDER SECTION 34(11) OF THE PLANNING ACT.**

a) DATE APPLICATION SUBMITTED TO MUNICIPALITY: \_\_\_\_\_  
(If application submitted before January 1, 2007 please use the O1 'pre-Bill 51' form.)

b) Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

**Part 7: Related Matters (if known)**

Are there other appeals not yet filed with the Municipality? YES  NO

Are there other planning matters related to this appeal? YES  NO   
(For example: A consent application connected to a variance application)

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "A"

A concurrent appeal is being filed by the Appellant against the adoption of Official Plan Amendment No. 535, of the City of London, Municipal File No. OZ-7663, with respect to the Near-Campus Neighbourhoods Area.

Part 8: Scheduling Information

How many days do you estimate are needed for hearing this appeal?  half day  1 day  2 days  3 days  
 4 days  1 week  More than 1 week – please specify number of days: \_\_\_\_\_

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
 1

Describe expert witness(es) area of expertise (For example: land use planner, architect, engineer, etc.):  
 land use planner

Do you believe this matter would benefit from mediation? YES  NO   
 (Mediation is generally scheduled only when all parties agree to participate)

Do you believe this matter would benefit from a prehearing conference? YES  NO   
 (Prehearing conferences are generally not scheduled for variances or consents)

If yes, why? likely to be multiple parties and issues

Part 9: Other Applicable Information \*\*Attach a separate page if more space is required.


Part 10: Required Fee

Total Fee Submitted: \$ 125.00

Payment Method:  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, payable to the Minister of Finance.

- Do not send cash.

- PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.



Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "B"

**Barry R. Card**

2012-D1102

BARISTER & SOLICITOR  
Certified Specialist - Municipal Law: Local Government/ Land Use Planning & Development Law

568 RIDGEWOOD CRESCENT  
LONDON, ONTARIO N6J 3J2  
TELEPHONE (519) 433-5117 • FACSIMILE (519) 963-0285

Internet Address: [cardlaw@rogers.com](mailto:cardlaw@rogers.com)

August 21, 2012

**DELIVERED**

Catharine Saunders, City Clerk  
Corporation of the City of London  
City Hall, 3<sup>rd</sup> Floor  
300 Dufferin Avenue  
London, Ontario  
N6B 1Z2

City Clerk

No. 2800

Subject Notice of Appeal - OPA  
No. 535 - Near-Campus  
Neighbourhoods Area - Arnon

AUG 21 2012

Kaplansky - OZ-7663  
Ref. Welter, JPB, J Fleming

C.C. Grotz, Infinis, Barrett  
Ramsay, Mandula, Amacpherson  
Leunissen, Blenry, Saunders

Dear Ms. Saunders:

**Re: Notices of Appeal  
Official Plan Amendment No. 535 and Zoning By-law Z-1-122125  
Near-Campus Neighbourhoods Area  
Arnon Kaplansky**

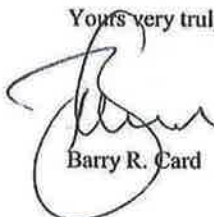
SCANNED TO ALL  
DATE: Aug 21/12  
mm

I am the solicitor for Arnon Kaplansky and enclose the following:

1. Appeal of OPA No. 535 (Appellant Form) and certified cheque in the sum of \$125.00; and
2. Appeal of Zoning By-law No. Z-1-122125 (Appellant Form) and certified cheque in the sum of \$125.00.

If anything further is required to permit the City to forward these appeals to the Board, please let me know.

Yours very truly,



Barry R. Card

BRC:jmh  
Encls.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "B"



Environment and Land Tribunals Ontario  
**Ontario Municipal Board**  
655 Bay Street, Suite 1800 Toronto, Ontario M5G 1E5  
TEL: (416) 212-6349 or Toll Free: 1-866-448-2248  
FAX: (416) 326-5370  
www.elt.o.gov.on.ca

**FORM**

**APPELLANT FORM (A1)  
PLANNING ACT**

**SUBMIT COMPLETED**

**TO  
MUNICIPALITY/APPROVAL  
AUTHORITY**

Use Stamp - Appeal Received by Municipality

Receipt Number (OMB Office Use Only)

**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Minor Variance	<input type="checkbox"/> Appeal a decision	45(12)
	<input type="checkbox"/> Appeal a decision	53(19)
Consent/Severance	<input type="checkbox"/> Appeal conditions imposed	53(27)
	<input type="checkbox"/> Appeal changed conditions	53(14)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	34(19)
	<input type="checkbox"/> Appeal the passing of a Zoning By-law	34(11)
Zoning By-law or Zoning By-law Amendment	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	
	<input type="checkbox"/> Appeal the passing of an Interim Control By-law	36(4)
Interim Control By-law	<input checked="" type="checkbox"/> Appeal a decision	17(24) or 17(36)
Official Plan or Official Plan Amendment	<input type="checkbox"/> Failed to make a decision on the plan within 180 days	17(40)
	<input type="checkbox"/> Application for an amendment to the Official Plan – failed to make a decision on the application within 180 days	22(7)
	<input type="checkbox"/> Application for an amendment to the Official Plan – refused by the municipality	
	<input type="checkbox"/> Appeal a decision	51(39)
Plan of Subdivision	<input type="checkbox"/> Appeal conditions imposed	51(43) or 51(48)
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	51(34)

**Part 2: Location Information**

186-188 Huron Street & 2 Audrey Street; 86 Cartwright Street; 754 Maitland Street  
Address and/or Legal Description of property subject to the appeal:  
A1 Revised April 2010

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "B"

Municipality/Upper tier: City of London

**Part 3: Appellant Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Amon Kaplansky on behalf of KAP Holdings Inc., Kapland Construction Inc. and Kapland Inc.,  
c/o Barry R. Card, Barrister and Solicitor

Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation)

Professional Title (if applicable): \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Mailing Address: 568 Ridgewood Crescent London  
Street Address Apt/Suite/Unit# City/Town

Ontario N6J 3J2  
Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: August 21, 2012

*(Signature not required if the appeal is submitted by a law office.)*  
**Barry R. Card**

**Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.**

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 28 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

**Part 4: Representative Information (if applicable)**

**I hereby authorize the named company and/or individual(s) to represent me:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Professional Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street Address Apt/Suite/Unit# City/Town

Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.**

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "B"

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Provide specific information about what you are appealing. For example: Municipal File Number(s), By-law Number(s), Official Plan Number(s) or Subdivision Number(s):

(Please print)

Official Plan Amendment No. 535, City of London re Near-Campus Neighbourhoods Area.  
Municipal File No. OZ-7663

2. Outline the nature of your appeal and the reasons for your appeal. Be specific and provide land-use planning reasons (for example: the specific provisions, sections and/or policies of the Official Plan or By-law which are the subject of your appeal - if applicable). \*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)

1. The Appellant appeals the adoption of OPA 535 as it applies to its properties at 186-188 Huron Street & 2 Audrey Street, 86 Cartwright Street and 754 Maitland Street.
2. The Official Plan Amendment constitutes an unjustified impediment to meritorious intensification.
3. The PPS aims to encourage intensification and cost-effective development standards that facilitate intensification. The proposed OPA is not consistent with these Provincial policies.

**THE FOLLOWING SECTIONS (a&b) APPLY ONLY TO APPEALS OF ZONING BY-LAW AMENDMENTS UNDER SECTION 34(11) OF THE PLANNING ACT.**

a) DATE APPLICATION SUBMITTED TO MUNICIPALITY: \_\_\_\_\_  
(If application submitted before January 1, 2007 please use the O1 'pre-Bill 51' form.)

b) Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

**Part 7: Related Matters (if known)**

Are there other appeals not yet filed with the Municipality? YES  NO

Are there other planning matters related to this appeal? YES  NO

(For example: A consent application connected to a variance application)

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)

Agenda Item #	Page #

M. Tomazincic  
 File #OZ-7663

**APPENDIX "B"**

A concurrent appeal is being filed by the Appellant against the passing of Zoning By-law No. Z.-122125, of the City of London, Municipal File No. OZ-7663, with respect to the Near-Campus Neighbourhoods Area.

**Part 8: Scheduling Information**

How many days do you estimate are needed for hearing this appeal?  half day  1 day  2 days  3 days  
 4 days  1 week  More than 1 week – please specify number of days: \_\_\_\_\_

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
 1

Describe expert witness(es)' area of expertise (For example: land use planner, architect, engineer, etc.):  
 land use planner

Do you believe this matter would benefit from mediation? YES  NO   
 (Mediation is generally scheduled only when all parties agree to participate)

Do you believe this matter would benefit from a prehearing conference? YES  NO   
 (Prehearing conferences are generally not scheduled for variances or consents)

If yes, why? likely to be multiple parties and issues

**Part 9: Other Applicable Information** \*\*Attach a separate page if more space is required.


**Part 10: Required Fee**

Total Fee Submitted: \$ 125.00

Payment Method:  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, payable to the Minister of Finance.
- Do not send cash.
- **PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.**

Agenda Item #	Page #
---------------	--------

M. Tomazincic  
File #OZ-7663

APPENDIX "C"



Environment and Land Tribunals Ontario  
**Ontario Municipal Board**  
855 Bay Street, Suite 1500 Toronto, Ontario M5G 1E5  
TEL: (416) 212-8349 or Toll Free: 1-866-448-2248  
FAX: (416) 326-5370  
www.elt.o.gov.on.ca

**APPELLANT FORM (A1)  
PLANNING ACT**

**SUBMIT COMPLETED FORM  
TO MUNICIPALITY/APPROVAL AUTHORITY**

Date Stamp - Appeal Received by Municipality

**RECEIVED**  
AUG 24 2012

Receipt Number (OMB Office Use Only)

**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Minor Variance	<input type="checkbox"/> Appeal a decision	45(12)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	53(14)
Consent/Severance	<input type="checkbox"/> Appeal a decision	53(19)
	<input type="checkbox"/> Appeal conditions imposed	53(27)
	<input type="checkbox"/> Appeal changed conditions	53(14)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	53(14)
Zoning By-law or Zoning By-law Amendment	<input checked="" type="checkbox"/> Appeal the passing of a Zoning By-law	34(19)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	34(11)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	34(11)
Interim Control By-law	<input type="checkbox"/> Appeal the passing of an Interim Control By-law	38(4)
Official Plan or Official Plan Amendment	<input checked="" type="checkbox"/> Appeal a decision	17(24) or 17(36)
	<input type="checkbox"/> Failed to make a decision on the plan within 180 days	17(40)
	<input type="checkbox"/> Application for an amendment to the Official Plan – failed to make a decision on the application within 180 days	22(7)
	<input type="checkbox"/> Application for an amendment to the Official Plan – refused by the municipality	22(7)
Plan of Subdivision	<input type="checkbox"/> Appeal a decision	51(39)
	<input type="checkbox"/> Appeal conditions imposed	51(43) or 51(48)
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	51(34)

**Part 2: Location Information**

Address and/or Legal Description of property subject to the appeal: CITY WIDE

Municipality/Upper tier: CITY OF LONDON

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "C"

**Part 3: Appellant Information**

First Name: BRIAN Last Name: TOTH

Company Name or Association Name (Association must be incorporated – include copy of letter of Incorporation)

Professional Title (if applicable):

E-mail Address: [REDACTED]  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: [REDACTED] Alternate Telephone #:

Fax #:

Mailing Address: 70 WINDER GROVE S. LONDON  
Street Address Apt/Suite/Unit# City/Town  
ONTARIO N6K 4K6  
Province Country (if not Canada) Postal Code

Signature of Appellant: [Signature] Date: Aug. 23, 2012  
(Signature not required if the appeal is submitted by a law office.)

**Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.**

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 29 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

**Part 4: Representative Information (if applicable)**

**I hereby authorize the named company and/or individual(s) to represent me:**

First Name: Last Name:

Company Name:

Professional Title:

E-mail Address: By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: Alternate Telephone #:

Fax #:

Mailing Address: Street Address Apt/Suite/Unit# City/Town  
Province Country (if not Canada) Postal Code

Signature of Appellant: Date:

**Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.**

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "C"

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Provide specific information about what you are appealing. For example: Municipal File Number(s), By-law Number(s), Official Plan Number(s) or Subdivision Number(s):

(Please print)  
RE: OPA N535 & ZONING BYLAW No. Z-1-122125

2. Outline the nature of your appeal and the reasons for your appeal. Be specific and provide land-use planning reasons (for example: the specific provisions, sections and/or policies of the Official Plan or By-law which are the subject of your appeal - if applicable). \*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)  
NOT IN AGREEMENT WITH REDUCTION OF BEDROOMS FOR RESIDENTIAL USES WITHIN SPECIFIC AREAS OF THE CITY. THIS IS NOT CONSISTANT WITH POLICIES OF P.PS WITH RESPECT TO RESIDENTIAL INTENSIFICATION & OTHER SUCH MATTERS AS LEGAL COUNCIL MAY ADVISE.

**THE FOLLOWING SECTIONS (a&b) APPLY ONLY TO APPEALS OF ZONING BY-LAW AMENDMENTS UNDER SECTION 34(11) OF THE PLANNING ACT.**

a) DATE APPLICATION SUBMITTED TO MUNICIPALITY: FRIDAY AUGUST 24TH 2012  
(If application submitted before January 1, 2007 please use the O1 'pre-Bill 51' form.)

b) Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

**Part 7: Related Matters (if known)**

Are there other appeals not yet filed with the Municipality? YES  NO

Are there other planning matters related to this appeal? YES  NO   
(For example: A consent application connected to a variance application)

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)



Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "C"

**Part 8: Scheduling Information**

How many days do you estimate are needed for hearing this appeal?  half day  1 day  2 days  3 days  
 4 days  1 week  More than 1 week – please specify number of days: \_\_\_\_\_

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
 \_\_\_\_\_

Describe expert witness(es) area of expertise (For example: land use planner, architect, engineer, etc.):  
 \_\_\_\_\_

Do you believe this matter would benefit from mediation? YES  NO   
 (Mediation is generally scheduled only when all parties agree to participate)

Do you believe this matter would benefit from a prehearing conference? YES  NO   
 (Prehearing conferences are generally not scheduled for variances or consents)

If yes, why? \_\_\_\_\_

**Part 9: Other Applicable Information \*\*Attach a separate page if more space is required.**


**Part 10: Required Fee**

Total Fee Submitted: \$ 125.00 x 2

Payment Method:  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, payable to the Minister of Finance.
- Do not send cash.
- PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.

Agenda Item #	Page #
---------------	--------

M. Tomazincic  
File #OZ-7663

APPENDIX "D"



**APPELLANT FORM (A1)  
PLANNING ACT**

**SUBMIT COMPLETED FORM  
TO MUNICIPALITY/APPROVAL AUTHORITY**

Date Stamp - Appeal Received by Municipality

AUG 24 2012

Ref. \_\_\_\_\_  
C.C. \_\_\_\_\_

Receipt Number (OMB Office Use Only)

**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Minor Variance	<input type="checkbox"/> Appeal a decision	45(12)
Consent/Severance	<input type="checkbox"/> Appeal a decision	53(19)
	<input type="checkbox"/> Appeal conditions imposed	
	<input type="checkbox"/> Appeal changed conditions	53(27)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	53(14)
Zoning By-law or Zoning By-law Amendment	<input checked="" type="checkbox"/> Appeal the passing of a Zoning By-law	34(19)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	34(11)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	
Interim Control By-law	<input type="checkbox"/> Appeal the passing of an Interim Control By-law	38(4)
Official Plan or Official Plan Amendment	<input checked="" type="checkbox"/> Appeal a decision	17(24) or 17(36)
	<input type="checkbox"/> Failed to make a decision on the plan within 180 days	17(40)
	<input type="checkbox"/> Application for an amendment to the Official Plan – failed to make a decision on the application within 180 days	22(7)
	<input type="checkbox"/> Application for an amendment to the Official Plan – refused by the municipality	
Plan of Subdivision	<input type="checkbox"/> Appeal a decision	51(39)
	<input type="checkbox"/> Appeal conditions imposed	51(43) or 51(48)
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	51(34)

**Part 2: Location Information**

Address and/or Legal Description of property subject to the appeal: CITY WIDE

Municipality/Upper tier: CITY OF LONDON

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "D"

**Part 3: Appellant Information**

First Name: BRIAN Last Name: TOTH

Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation)

Professional Title (if applicable):

E-mail Address: [REDACTED]  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: [REDACTED] Alternate Telephone #:

Fax #:

Mailing Address: 70 WINDER GROVE S. LONDON  
Street Address Apt/Suite/Unit# City/Town

ONTARIO N6K 4K6  
Province Country (if not Canada) Postal Code

Signature of Appellant: [Signature] Date: Aug 23, 2012  
(Signature not required if the appeal is submitted by a law office.)

**Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.**

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 28 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

**Part 4: Representative Information (if applicable)**

I hereby authorize the named company and/or individual(s) to represent me:

First Name: Last Name:

Company Name:

Professional Title:

E-mail Address: [REDACTED]  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: Alternate Telephone #:

Fax #:

Mailing Address: Street Address Apt/Suite/Unit# City/Town

Province Country (if not Canada) Postal Code

Signature of Appellant: Date:

**Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.**

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "D"

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Provide specific information about what you are appealing. For example: Municipal File Number(s), By-law Number(s), Official Plan Number(s) or Subdivision Number(s):

(Please print) RE: **OPA N535** & ZONING BYLAW No. Z-1-122125

2. Outline the nature of your appeal and the reasons for your appeal. Be specific and provide land-use planning reasons (for example: the specific provisions, sections and/or policies of the Official Plan or By-law which are the subject of your appeal - if applicable). \*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print) NOT IN AGREEMENT WITH REDUCTION OF BEDROOMS FOR RESIDENTIAL USES WITHIN SPECIFIC AREAS OF THE CITY. THIS IS NOT CONSISTANT WITH POLICIES OF P.P.S WITH RESPECT TO RESIDENTIAL INTENSIFICATION & OTHER SUCH MATTERS AS LEGAL COUNCIL MAY ADVISE.

**THE FOLLOWING SECTIONS (a&b) APPLY ONLY TO APPEALS OF ZONING BY-LAW AMENDMENTS UNDER SECTION 34(11) OF THE PLANNING ACT.**

a) DATE APPLICATION SUBMITTED TO MUNICIPALITY: FRIDAY AUGUST 24<sup>TH</sup> 2012  
(If application submitted before January 1, 2007 please use the O1 'pre-Bill 51' form.)

b) Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

**Part 7: Related Matters (if known)**

Are there other appeals not yet filed with the Municipality? YES  NO   
Are there other planning matters related to this appeal? YES  NO   
(For example: A consent application connected to a variance application)

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)

Agenda Item #	Page #

**M. Tomazincic  
File #OZ-7663**

**APPENDIX "D"**

**Part 8: Scheduling Information**

How many days do you estimate are needed for hearing this appeal?  half day  1 day  2 days  3 days  
 4 days  1 week  More than 1 week – please specify number of days: \_\_\_\_\_

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
 \_\_\_\_\_

Describe expert witness(es)' area of expertise (For example: land use planner, architect, engineer, etc.):  
 \_\_\_\_\_

Do you believe this matter would benefit from mediation? YES  NO   
*(Mediation is generally scheduled only when all parties agree to participate)*

Do you believe this matter would benefit from a prehearing conference? YES  NO   
*(Prehearing conferences are generally not scheduled for variances or consents)*

If yes, why? \_\_\_\_\_

**Part 9: Other Applicable Information \*\* Attach a separate page if more space is required.**


**Part 10: Required Fee**

Total Fee Submitted: \$ 125.00 x 2

Payment Method:  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, payable to the Minister of Finance.
- Do not send cash.
- **PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.**

Agenda Item #    Page #  
 [ ]                    [ ]

M. Tomazincic  
 File #OZ-7663

APPENDIX "E"



Environment and Land Tribunals Ontario  
**Ontario Municipal Board**  
 655 Bay Street, Suite 1600 Toronto, Ontario M5G 1E5  
 TEL: (416) 212-6349 or Toll Free: 1-866-448-2248  
 FAX: (416) 326-5370  
 www.ello.gov.on.ca

**APPELLANT FORM (A1)  
 PLANNING ACT**

**SUBMIT COMPLETED FORM  
 TO MUNICIPALITY/APPROVAL AUTHORITY**



Receipt Number (OMB Office Use Only)  
 [ ]

**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Minor Variance	<input type="checkbox"/> Appeal a decision	45(12)
	<input type="checkbox"/> Appeal a decision	53(19)
Consent/Severance	<input type="checkbox"/> Appeal conditions imposed	53(27)
	<input type="checkbox"/> Appeal changed conditions	53(14)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	34(19)
	<input checked="" type="checkbox"/> Appeal the passing of a Zoning By-law	34(11)
Zoning By-law or Zoning By-law Amendment	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	38(4)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	17(24) or 17(38)
Interim Control By-law	<input type="checkbox"/> Appeal the passing of an Interim Control By-law	17(40)
Official Plan or Official Plan Amendment	<input type="checkbox"/> Appeal a decision	22(7)
	<input type="checkbox"/> Failed to make a decision on the plan within 180 days	51(39)
	<input type="checkbox"/> Application for an amendment to the Official Plan – failed to make a decision on the application within 180 days	51(43) or 51(48)
Plan of Subdivision	<input type="checkbox"/> Application for an amendment to the Official Plan – refused by the municipality	51(34)
	<input type="checkbox"/> Appeal a decision	
	<input type="checkbox"/> Appeal conditions imposed	
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	

**Part 2: Location Information**

Address and/or Legal Description of property subject to the appeal: City Wide  
 Municipality/Upper tier: City of London  
 A1 Revised April 2010 Page 2 of 5

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "E"

Part 3: Appellant Information

First Name: Jon Last Name: LEAHY  
 Company Name or Association Name (Association must be incorporated – Include copy of letter of incorporation):  
ESCALADE PROPERTY CORP.  
 Professional Title (if applicable): \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.  
 Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_  
 Fax #: \_\_\_\_\_  
 Mailing Address: PO Box 37 LAMBETH STN LONDON  
Street Address Apt/Suite/Unit# City/Town  
ONT. CANADA N6P 1P9  
Province Country (if not Canada) Postal Code  
 Signature of Appellant: \_\_\_\_\_ Date: 17-08-23  
(Signature not required if the appeal is submitted by a law office.)

Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 28 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

Part 4: Representative Information (if applicable)

I hereby authorize the named company and/or individual(s) to represent me:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Professional Title: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.  
 Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_  
 Fax #: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
Street Address Apt/Suite/Unit# City/Town  
 \_\_\_\_\_  
Province Country (if not Canada) Postal Code  
 Signature of Appellant: \_\_\_\_\_ Date: \_\_\_\_\_

Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "E"

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Provide specific information about what you are appealing. For example: Municipal File Number(s), By-law Number(s), Official Plan Number(s) or Subdivision Number(s):

(Please print)

Zoning By-law Amendment No. Z-1-122125

2. Outline the nature of your appeal and the reasons for your appeal. Be specific and provide land-use planning reasons (for example: the specific provisions, sections and/or policies of the Official Plan or By-law which are the subject of your appeal - if applicable). \*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)

- The amendment is not consistent with the policies in the PPS with respect to residential intensification  
 - Such other matters as legal Counsel may advise

**THE FOLLOWING SECTIONS (a&b) APPLY ONLY TO APPEALS OF ZONING BY-LAW AMENDMENTS UNDER SECTION 34(11) OF THE PLANNING ACT.**

a) DATE APPLICATION SUBMITTED TO MUNICIPALITY: \_\_\_\_\_  
 (If application submitted before January 1, 2007 please use the O1 'pre-Bill 51' form.)

b) Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
 \*\*If more space is required, please continue in Part 9 or attach a separate page.

\_\_\_\_\_

**Part 7: Related Matters (if known)**

Are there other appeals not yet filed with the Municipality? YES  NO

Are there other planning matters related to this appeal? YES  NO   
 (For example: A consent application connected to a variance application)

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)

OP Amendment No. 535



Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "E"

**Part 8: Scheduling Information**

How many days do you estimate are needed for hearing this appeal?  half day  1 day  2 days  3 days  
 4 days  1 week  More than 1 week – please specify number of days: \_\_\_\_\_

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
one

Describe expert witness(es)' area of expertise (For example: land use planner, architect, engineer, etc.):  
planner

Do you believe this matter would benefit from mediation? YES  NO   
*(Mediation is generally scheduled only when all parties agree to participate)*

Do you believe this matter would benefit from a prehearing conference? YES  NO   
*(Prehearing conferences are generally not scheduled for variances or consents)*

If yes, why? \_\_\_\_\_

**Part 9: Other Applicable Information \*\*Attach a separate page if more space is required.**


**Part 10: Required Fee**

Total Fee Submitted: \$ 125.00

Payment Method:  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, payable to the Minister of Finance.
- Do not send cash.
- PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.

Agenda Item #	Page #
---------------	--------

M. Tomazincic  
File #OZ-7663

APPENDIX "F"



Environment and Land Tribunals Ontario  
**Ontario Municipal Board**  
655 Bay Street, Suite 1500 Toronto, Ontario M5G 1E5  
TEL: (416) 212-6349 or Toll Free: 1-866-448-2248  
FAX: (416) 320-5370  
www.elt.o.gov.on.ca

**APPELLANT FORM (A1)  
PLANNING ACT**

**SUBMIT COMPLETED FORM  
TO MUNICIPALITY/APPROVAL AUTHORITY**

Date Stamp - Appeal Received by Municipality

AUG 24 2012

RECEIVED

Receipt Number (OMB Office Use Only)

**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Minor Variance	<input type="checkbox"/> Appeal a decision	45(12)
	<input type="checkbox"/> Appeal a decision	53(19)
Consent/Severance	<input type="checkbox"/> Appeal conditions imposed	53(27)
	<input type="checkbox"/> Appeal changed conditions	53(14)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	34(19)
	<input type="checkbox"/> Appeal the passing of a Zoning By-law	34(11)
Zoning By-law or Zoning By-law Amendment	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	38(4)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	17(24) or 17(38)
Interim Control By-law	<input checked="" type="checkbox"/> Appeal a decision	17(40)
Official Plan or Official Plan Amendment	<input type="checkbox"/> Failed to make a decision on the plan within 180 days	22(7)
	<input type="checkbox"/> Application for an amendment to the Official Plan – failed to make a decision on the application within 180 days	51(39)
	<input type="checkbox"/> Application for an amendment to the Official Plan – refused by the municipality	51(43) or 51(48)
Plan of Subdivision	<input type="checkbox"/> Appeal a decision	51(34)
	<input type="checkbox"/> Appeal conditions imposed	
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	

**Part 2: Location Information**

Address and/or Legal Description of property subject to the appeal: City Wide

Municipality/Upper tier: City of London

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "F"

Part 3: Appellant Information

First Name: Jon Last Name: LEAHY  
 Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation):  
ESCALADE PROPERTY CORP.  
 Professional Title (if applicable): \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.  
 Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_  
 Fax #: \_\_\_\_\_  
 Mailing Address: PO Box 37 LANGSTON STN LONDON  
Street Address Apt/Suite/Unit# City/Town  
ONT. CANADA N6P 1P9  
Province Country (if not Canada) Postal Code  
 Signature of Appellant: \_\_\_\_\_ Date: 12.08.23  
(Signature not required if the appeal is submitted by a law office.)

Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 28 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

Part 4: Representative Information (if applicable)

I hereby authorize the named company and/or individual(s) to represent me:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Professional Title: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.  
 Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_  
 Fax #: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
Street Address Apt/Suite/Unit# City/Town  
 \_\_\_\_\_  
Province Country (if not Canada) Postal Code  
 Signature of Appellant: \_\_\_\_\_ Date: \_\_\_\_\_

Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "F"

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Provide specific information about what you are appealing. For example: Municipal File Number(s), By-law Number(s), Official Plan Number(s) or Subdivision Number(s):

(Please print)

OP Amendment No. 535

2. Outline the nature of your appeal and the reasons for your appeal. Be specific and provide land-use planning reasons (for example: the specific provisions, sections and/or policies of the Official Plan or By-law which are the subject of your appeal - if applicable). \*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)

- The amendment is not consistent with the policies in the PPS with respect to residential intensification  
- Such other matters as legal counsel may advise

**THE FOLLOWING SECTIONS (a&b) APPLY ONLY TO APPEALS OF ZONING BY-LAW AMENDMENTS UNDER SECTION 34(11) OF THE *PLANNING ACT*.**

a) DATE APPLICATION SUBMITTED TO MUNICIPALITY: \_\_\_\_\_  
(If application submitted before January 1, 2007 please use the O1 'pre-Bill 51' form.)

b) Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

\_\_\_\_\_

**Part 7: Related Matters (if known)**

Are there other appeals not yet filed with the Municipality? YES  NO

Are there other planning matters related to this appeal? YES  NO   
(For example: A consent application connected to a variance application)

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)

Zoning By-law Amendment No. 2-1-122125

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "F"

**Part 8: Scheduling Information**

How many days do you estimate are needed for hearing this appeal?  half day  1 day  2 days  3 days  
 4 days  1 week  More than 1 week – please specify number of days: \_\_\_\_\_

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
One

Describe expert witness(es)' area of expertise (For example: land use planner, architect, engineer, etc.):  
Planner

Do you believe this matter would benefit from mediation? YES  NO   
(Mediation is generally scheduled only when all parties agree to participate)

Do you believe this matter would benefit from a prehearing conference? YES  NO   
(Prehearing conferences are generally not scheduled for variances or consents)

If yes, why? \_\_\_\_\_

**Part 9: Other Applicable Information \*\*Attach a separate page if more space is required.**


**Part 10: Required Fee**

Total Fee Submitted: \$ 125.00

Payment Method:  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, payable to the Minister of Finance.
- Do not send cash.
- PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.....

Agenda Item #	Page #
---------------	--------

M. Tomazincic  
File #OZ-7663

APPENDIX "G"



Environment and Land Tribunals Ontario  
**Ontario Municipal Board**  
655 Bay Street, Suite 1500 Toronto, Ontario M5G 1E5  
TEL: (416) 212-8349 or Toll Free: 1-866-449-2248  
FAX: (416) 326-6370  
www.eto.gov.on.ca

**APPELLANT FORM (A1)  
PLANNING ACT**

**SUBMIT COMPLETED FORM  
TO MUNICIPALITY/APPROVAL AUTHORITY**



Receipt Number (OMB Office Use Only)

**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Minor Variance	<input type="checkbox"/> Appeal a decision	45(12)
	<input type="checkbox"/> Appeal a decision	53(19)
Consent/Severance	<input type="checkbox"/> Appeal conditions imposed	53(27)
	<input type="checkbox"/> Appeal changed conditions	53(14)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	34(19)
	<input checked="" type="checkbox"/> Appeal the passing of a Zoning By-law	34(11)
Zoning By-law or Zoning By-law Amendment	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	38(4)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	17(24) or 17(36)
Interim Control By-law	<input type="checkbox"/> Appeal a decision	17(40)
	<input type="checkbox"/> Failed to make a decision on the plan within 180 days	22(7)
	<input type="checkbox"/> Application for an amendment to the Official Plan – failed to make a decision on the application within 180 days	51(39)
Official Plan or Official Plan Amendment	<input type="checkbox"/> Application for an amendment to the Official Plan – refused by the municipality	51(43) or 51(48)
	<input type="checkbox"/> Appeal a decision	51(34)
Plan of Subdivision	<input type="checkbox"/> Appeal conditions imposed	
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	

**Part 2: Location Information**

1461, 1463 & 1465 Oxford Street and 613-629 First Street, London, Ontario  
Address and/or Legal Description of property subject to the appeal:

Municipality/Upper tier: City of London

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "G"

**Part 3: Appellant Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Adamas Group Inc.  
Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation)

Professional Title (if applicable): \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Mailing Address: 1956 Mallard Road London  
Street Address Apt/Suite/Unit# City/Town  
Ontario N6H 5M1  
Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: August 24, 2012  
(Signature not required if the appeal is submitted by a law office.)

**Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.**

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 28 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

**Part 4: Representative Information (if applicable)**

**I hereby authorize the named company and/or individual(s) to represent me:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Professional Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street Address Apt/Suite/Unit# City/Town  
Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.**

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "G"

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Provide specific information about what you are appealing. For example: Municipal File Number(s), By-law Number(s), Official Plan Number(s) or Subdivision Number(s):

(Please print)

By-Law No. Z-1-122125 dated July 24, 2012 under Planning Division File No. OZ-7663

2. Outline the nature of your appeal and the reasons for your appeal. Be specific and provide land-use planning reasons (for example: the specific provisions, sections and/or policies of the Official Plan or By-law which are the subject of your appeal - if applicable). \*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)

The By-Law is inconsistent with Provincial Planning Policies including policies related to residential intensification policies. The current By-Law supports neighbouring facilities and the subject By-Law is detrimental to the requirements of the existing neighbourhood. The facilities to be constructed on the subject lands are compatible with the requirements of the general neighbourhood.

**THE FOLLOWING SECTIONS (a&b) APPLY ONLY TO APPEALS OF ZONING BY-LAW AMENDMENTS UNDER SECTION 34(11) OF THE PLANNING ACT.**

a) DATE APPLICATION SUBMITTED TO MUNICIPALITY: \_\_\_\_\_  
(If application submitted before January 1, 2007 please use the O1 'pre-Bill 51' form.)

b) Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

**Part 7: Related Matters (if known)**

Are there other appeals not yet filed with the Municipality? YES  NO

Are there other planning matters related to this appeal? YES  NO

(For example: A consent application connected to a variance application)

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)

Official Plan Amendment No. 535



Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "G"

**Part 8: Scheduling Information**

How many days do you estimate are needed for hearing this appeal?  half day  1 day  2 days  3 days  
 4 days  1 week  More than 1 week – please specify number of days: \_\_\_\_\_

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
Four

Describe expert witness(es)' area of expertise (For example: land use planner, architect, engineer, etc.):  
One Land Use Planner and one Architect

Do you believe this matter would benefit from mediation? YES  NO   
*(Mediation is generally scheduled only when all parties agree to participate)*

Do you believe this matter would benefit from a prehearing conference? YES  NO   
*(Prehearing conferences are generally not scheduled for variances or consents)*

If yes, why? In order to facilitate a resolution to the subject appeal

**Part 9: Other Applicable Information \*\*Attach a separate page if more space is required.**

The Appellant relies upon the statements made in article 2 of the within Appeal.

**Part 10: Required Fee**

Total Fee Submitted: \$ 125.00

Payment Method:  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, payable to the Minister of Finance.
- Do not send cash.
- PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "H"



Environment and Land Tribunals Ontario  
**Ontario Municipal Board**  
855 Bay Street, Suite 1500 Toronto, Ontario M5G 1E5  
TEL: (416) 212-6349 or Toll Free: 1-888-448-2248  
FAX: (416) 326-5370  
www.elt.o.gov.on.ca

**APPELLANT FORM (A1)  
PLANNING ACT**

**SUBMIT COMPLETED FORM  
TO MUNICIPALITY/APPROVAL AUTHORITY**

Date Stamp - Appeal Received by Municipality

RECEIVED  
AUG 24 2012

Receipt Number (OMB Office Use Only)

**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Minor Variance	<input type="checkbox"/> Appeal a decision	45(12)
	<input type="checkbox"/> Appeal a decision	53(19)
Consent/Severance	<input type="checkbox"/> Appeal conditions imposed	53(27)
	<input type="checkbox"/> Appeal changed conditions	53(14)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	34(19)
	<input type="checkbox"/> Appeal the passing of a Zoning By-law	34(11)
Zoning By-law or Zoning By-law Amendment	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	38(4)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	17(24) or 17(36)
Interim Control By-law	<input type="checkbox"/> Appeal the passing of an Interim Control By-law	17(40)
Official Plan or Official Plan Amendment	<input checked="" type="checkbox"/> Appeal a decision	22(7)
	<input type="checkbox"/> Failed to make a decision on the plan within 180 days	51(39)
	<input type="checkbox"/> Application for an amendment to the Official Plan – failed to make a decision on the application within 180 days	51(43) or 51(48)
	<input type="checkbox"/> Application for an amendment to the Official Plan – refused by the municipality	51(34)
Plan of Subdivision	<input type="checkbox"/> Appeal a decision	
	<input type="checkbox"/> Appeal conditions imposed	
	<input type="checkbox"/> Failed to make a decision on the application within 180 days	

**Part 2: Location Information**

1461, 1463 & 1465 Oxford Street and 613-629 First Street, London, Ontario  
Address and/or Legal Description of property subject to the appeal:

Municipality/Upper tier: City of London

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "H"

**Part 3: Appellant Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Adamas Group Inc.  
Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation)

Professional Title (if applicable): \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Mailing Address: 1956 Mallard Road \_\_\_\_\_ London  
Street Address Apt/Suite/Unit# City/Town  
Ontario \_\_\_\_\_ N6H 5M1  
Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: August 24, 2012  
(Signature not required if the appeal is submitted by a law office.)

**Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.**

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 28 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

**Part 4: Representative Information (if applicable)**

**I hereby authorize the named company and/or individual(s) to represent me:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Professional Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street Address Apt/Suite/Unit# City/Town  
Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.**

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "H"

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Provide specific information about what you are appealing. For example: Municipal File Number(s), By-law Number(s), Official Plan Number(s) or Subdivision Number(s):

(Please print)

Official Plan Amendment No. 535 to the Official Plan for the City of London under By-Law C.P.-1284(sn)-233  
Planning Division File No. OZ-7663

2. Outline the nature of your appeal and the reasons for your appeal. Be specific and provide land-use planning reasons (for example: the specific provisions, sections and/or policies of the Official Plan or By-law which are the subject of your appeal - if applicable). \*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)

The Official Plan Amendment is inconsistent with Provincial Planning Policies including policies related to residential intensification policies. The current Official Plan supports neighbouring facilities and the subject Amendment to the Official Plan is detrimental to the requirements of the existing neighbourhood.  
The facilities to be constructed on the subject lands are compatible with the requirements of the general neighbourhood.

**THE FOLLOWING SECTIONS (a&b) APPLY ONLY TO APPEALS OF ZONING BY-LAW AMENDMENTS UNDER SECTION 34(11) OF THE PLANNING ACT.**

a) DATE APPLICATION SUBMITTED TO MUNICIPALITY: \_\_\_\_\_  
(If application submitted before January 1, 2007 please use the O1 'pre-Bill 51' form.)

b) Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

**Part 7: Related Matters (if known)**

Are there other appeals not yet filed with the Municipality? YES  NO

Are there other planning matters related to this appeal? YES  NO   
(For example: A consent application connected to a variance application)

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)

Appeal to Zoning By-Law No. Z-1-122125

Agenda Item #	Page #

M. Tomazincic  
File #OZ-7663

APPENDIX "H"

**Part 8: Scheduling Information**

How many days do you estimate are needed for hearing this appeal?  half day  1 day  2 days  3 days  
 4 days  1 week  More than 1 week – please specify number of days: \_\_\_\_\_

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
Four

Describe expert witness(es) area of expertise (For example: land use planner, architect, engineer, etc.):  
One Land Use Planner and one Architect

Do you believe this matter would benefit from mediation? YES  NO   
 (Mediation is generally scheduled only when all parties agree to participate)

Do you believe this matter would benefit from a prehearing conference? YES  NO   
 (Prehearing conferences are generally not scheduled for variances or consents)

If yes, why? In order to facilitate a resolution to the subject appeal

**Part 9: Other Applicable Information \*\*Attach a separate page if more space is required.**

The Appellant relies upon the statements made in article 2 of the within Appeal.

**Part 10: Required Fee**

Total Fee Submitted: \$ 125.00

Payment Method:  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, payable to the Minister of Finance.
- Do not send cash.
- PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.