

Notice of Appeal

To ensure your appeal is properly filed, please sign and complete all sections of this form and submit it to the Environmental Appeal Board via mail or email. You will need to include a \$25 appeal fee via cheque, money order or bank draft payable to the Minister of Finance. If you submit this document by email, you will have eight days afterward to pay the fee.

Section 1: Appellant Information

Last Name (if Individual is appealing)		Organization Name (if Organization is appealing)					
First Name (if Individual is appealing)		Pronouns (for Individuals)					
		🗆 He/Him	🗖 She/Her	They/The	ir 🗆 S	Sir/Hir	Zie/Zir
Address			City		Prov.	Postal	Code
Email			Telephone				
	I wish to self-identify as Indigenous (of Inuit, Métis, First Nation, status or non-status identity or ancestry, or as						
representing a group that is or primarily represents or serves indigenous communities [tribes, bands,						s, treaty	
	offices, friendship centres, etc.]). If you self-identify, the Board will ensure cultural sensitivities are respected as						
	part of implementing the Truth and Reconciliation Committee's 94 Calls to Action. While data may be collected						
	broadly, you will not be identified as Indigenous, outside the appeal, if you self-identify.						

Section 2: Representative Information

Name				First Name		
ouns						
🗆 He/Him 🔲 She/Her 🔄 They/Their 🔲 Sir/Hir			Zie/Zir			
nization	(if applicable)					
ess				City	Prov.	Postal Code
Email			Telephone			
I wish to self-identify as Indigenous (of Inuit, Métis, First Nation, status or non-status identity or ancestry, or as						
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broadly, you will not be identified as Indigenous, outside the appeal, if you self-identify.						
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NOTE: The email(s) and/or address(s) above are the presumed addresses for the delivery of documents from the Board and other parties, unless you specify otherwise (on a separate page).

Section 3: Decision Under Appeal

Decision maker (including their title and the Ministry or government agency responsible)				
Date the decision was received	Decision number (if applicable)			
I confirm I have included a copy of the decision I wish to appeal or, if not, I have included an explanation why I have not done so.				

Section 4: Reason for the Appeal

Reason the appealed decision should be changed, and the desired outcome (attach more pages if needed)		

Section 5: Special Handling

	I need to be contacted promptly to discuss special handling of my appeal (for example, a stay decision to
	temporarily stop the decision while the appeal is underway).
	I am appealing a quota decision under section 60 of the Wildlife Act and I certify that, to the best of my
	knowledge, I can only obtain a practical remedy from this appeal if it is decided in the next six months.

Section 6: Authorization

By signing below or checking the provided box, I confirm the information I have provided is, to the best of my knowledge, accurate and complete. I also understand that:

- I (or my representative) must be available to respond to questions from the Environmental Appeal Board (EAB) during the life of my appeal, and I (or my representative) must advise the EAB, as soon as possible, of any changes to my (or my representative's) address or contact information, or the delivery address; and
- my appeal can be dismissed if I fail to respond to questions or directions from the Board within a reasonable timeframe, as determined by the EAB and as set out in its Rules.

Signature		Date		
	I am checking this box in place of signing this form. This amounts to a legal signature and confirms my			
	acknowledgement and agreement with the requirements outlined in this Section.			