



4712 - 50 Street
P.O. Box 630
Two Hills, AB, T0B 4K0

Tel: (780) 657-3395
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APPEAL NOTICE

(If you want to appeal a Direction you must serve this Appeal Notice by delivering it to the Town of Two Hills Administration Office within 14 days after the Direction was served)

Bylaw to be Appealed _____ Date _____

TO: TOWN OF TWO HILLS
4712 – 50 STREET
P.O. Box 630
Two Hills, AB T0B 4K0

I am appealing the Direction (_____), regarding _____
(Date on Directive) (Property Address)

You must give reasons for your appeal: _____

(Use a separate sheet if necessary)

Signature

Name Printed

Street Address

Mailing address

**NOTE: ONLY appeals filed WITHIN THE 14 DAY PERIOD will be heard by Council.
You will be notified by mail of the hearing date.**