

December 15 2011

Ministry of Municipal Affairs and Housing

Municipal Services Office – Central Ontario

777 Bay Street 2<sup>nd</sup> floor

Toronto On M5G 2E5

Att: Andrew Doersam Senior Planner Fax # 416-585-6451

Re: Additional Information for appeal of Halton's Regional Official Plan Amendment No 38  
(File # 24-OP-0027-038)

Dear Sir,

This letter provides additional information to the attached Appellant Form (A1). For further information please contact me (James Fisher). Contact information is shown on Form (A1).

Appellant:

The Halton Region Federation of Agriculture (HRFA) represents bona fide farmers in the Region of Halton and has been active on behalf of these farmers in the ROPA 38 process. However as the HRFA is not an incorporated body, this appeal is lodged by a group of individuals named; James Fisher, Lieven Gevaert, John Opsteen, Norm Richardson, and Peter Lambrick, all of whom reside in the Region of Halton. It is one appeal jointly by the group of individuals to express the concerns of the HRFA, under the auspices of the HRFA.

Nature of Appeal

This appeal is intended to deal with agricultural policy in the Region of Halton. The Region of Halton has a goal of a permanent viable agricultural industry. This goal is supported by the HRFA and, we believe, by the Province of Ontario. Unfortunately not all of the policies in ROPA 38 are consistent with this goal. This appeal will challenge those policies on the basis of consistency with Provincial Policy, verifiable science, good and/or proper planning practices, using plain and understandable language, and contradictions within ROPA 38 and/or Halton policy in general.

The specific policies of this appeal include;

Part II as it relates to rural lands and agriculture.

Part III Development Criteria Section and Land Use Designations policies except those that applying strictly to the Urban Areas.

Part IV as it relates to rural lands and agriculture.

Part V as it relates to rural lands and agriculture.

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AND HOUSING

Part VI Definitions that relate to Rural Lands and agriculture.

Maps - Map 1 Regional structure, Map 1E (now 1D) Prime Agricultural Areas, Map 1G (now 1F) Key Features within the Greenbelt and Regional Natural Heritage Systems.

I trust we have supplied all the required information. Note this appeal is being sent by fax and mail.

Sincerely,

James Fisher

Original signed by

Lieven Gevaert

Original signed by

John Upsteen

Original signed by

Norm Richardson

Original signed by

Peter Lambrick

9636 Second Line RR#1 CAMPBELLVILLE ON LOP 1B0

605 QUELPH LINE RR#2 CAMPBELLVILLE LOP 1B0

NORMAN RICHARDSON

Original signed by

6214 APPLEBY LINE BURLINGTON ONT. L7M 0P7



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) 326-5370  
 www.eltto.gov.on.ca

**APPELLANT FORM (A1)  
 PLANNING ACT**

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

Date 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(19)
	<input type="checkbox"/> Appeal changed conditions	53(27)
	<input type="checkbox"/> Failed to make a decision on the application within 90 days	53(14)
	<input type="checkbox"/> Appeal the passing of a Zoning By-law	34(19)
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	34(11)
	<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	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**

~~111~~ All of Halton  
 Address and/or Legal Description of property subject to the appeal:

Municipality/Upper tier: Halton Region

**Part 3: Appellant Information**

First Name: James Fisher Last Name: Fisher

See attached letter

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

Professional Title (if applicable):

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

Daytime Telephone #: 905 336 7499 Alternate Telephone #: 905-638-7500

Fax #:

Mailing Address: 6420 McNiven Road Kilbride  
Street Address Apt/Suite/Unit# City/Town

Ont L7P0K5  
Province Country (if not Canada) Postal Code

Signature of Appellant: Original signed by [Signature] Date: Dec 15/2011  
(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.

**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)

Haltom Region Official Plan Amendment No. 38  
File # 24-OP-0027-038

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)

See attached Letter

**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.

Empty box for explanatory note.

**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)  
Empty box for OMB Reference Number(s) and/or Municipal File Number(s).

**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: Unknown

How many expert witnesses and other witnesses do you expect to have at the hearing providing evidence/testimony?  
2 experts 2 other

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

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? Complicated → will need focus

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

<u>See Letter</u>

**Part 10: Required Fee**

Total Fee Submitted: \$ 125<sup>00</sup>

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.