



# The Corporation of the Township of Georgian Bay

99 Lone Pine Road, Port Severn,  
ON L0K 1S0  
Phone (705) 538-2337 Ext. 251  
Fax (705) 538-1850

E-mail • [amps@gbtownship.ca](mailto:amps@gbtownship.ca)  
Web • [www.gbtownship.ca](http://www.gbtownship.ca)

## Hearing Appeal Request

### Administrative Monetary Penalty System

A person may request an appeal of a Screening Officer's decision no later than 15 days after the date on which the Screening Officer's decision is given to them.

All meetings will be held virtually via zoom, if you require accommodation, you should inform the Township as soon as possible. Please advise the Township of your accommodation needs so that appropriate arrangements can be made prior to your appointment.

Please fill out the form below to request an appeal of the screening officers decision.

SECTION 1 – PENALTY NOTICE INFORMATION		
Penalty Notice Number	Penalty Date	Location
Screening Review Date	I affirm that I was present at the scheduled screening review and, given the outcome, I intend to advance my appeal to the level of a Hearing Officer.	

SECTION 2 – DEFENDANT INFORMATION			
First and Last Name			
Phone Number	Email Address		
Mailing Address			
City	Province/State	Postal/Zip Code	Country
Will you be representing yourself? (*If no, please be sure to fill out the Authorization to Act as Representative form on the Township webpage and submit with this document.)			
YES		NO	



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## SECTION 3 – REASON FOR REVIEW

Provide a factual and detailed explanation of the reason(s) for your Screening Review.

PLEASE NOTE: When you attend the Screening Review, please be sure to send all supporting documents virtually 14 days in advance by email to [amps@gbtownship.ca](mailto:amps@gbtownship.ca). For example: a death certificate, police report, medical note, photographs, condominium letter/lease or accessible parking permit.

If paying the administrative penalty will cause financial difficulty and you require additional time to pay, please send all supporting financial documents to support your claim. For more information on our financial hardship policy, please visit our Township website.

By signing this form, I certify that all information provided is true and accurate. I will notify the Township if any of the information changes before the review date.

Signature

Date



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Once the form is complete, please submit all documents in one of the following ways:

1. **Email** → [amps@gbtownship.ca](mailto:amps@gbtownship.ca)
2. **In-Person** → Township of Georgian Bay Administration Building, 99 Lone Pine Road Port Severn, Ontario, L0K 1S0.
3. **Mail to:** → Township of Georgian Bay  
99 Lone Pine Road  
Port Severn, Ontario  
L0K 1S0.

Once the form has been received and processed, you will be notified when your hearing review will occur as well as more detailed information.

If you have any further questions or concerns, please contact the By-law Department at 705-538-2337 ext. 251 or by e-mail at [amps@gbtownship.ca](mailto:amps@gbtownship.ca)  
Please reference your penalty notice number.

FOR INTERNAL USE ONLY			
Request Received	Appointment Information		
Date Stamp:	Appointment Date:	Appointment Time:	Date Notified:
	Penalty Notice Recipient Notified by:		
	Email	Mail	In person