



Important Information

- Use this appeal form for appeals made under section 38 of the *Provincial Animal Welfare Services Act* to appeal a compliance order or the removal of an animal by the Chief Animal Welfare Inspector.
- You must complete all sections of this form and attach additional information/documents as required. The processing of your appeal could be delayed if information or documents are missing.
- You have the right to a representative. If you have a representative, have them complete the Board's Declaration of Representative form and attach it to this form.
- Please note that appeals of compliance orders, removal orders or an order to keep an animal in the Chief Animal Welfare Inspector's care under s. 38 must be made within 10 business days of receipt of the notice of order or removal.

1. Appellant's Information

Last Name		First Name		Middle Initial
Address				
Unit Number	Street Number	Street Name		PO Box
City/Town/Municipality			Province	Postal Code
Telephone Number		Email Address		

2. Information about your receipt from Animal Welfare Services of the Compliance Order, Removal Order, Order to Keep or Statement of Account that you are appealing.

Date Issued (yyyy/mm/dd)	Date Received (yyyy/mm/dd)
Method of Service (How did you receive the Compliance Order, Removal Order, Order to Keep or Statement of Account from the Animal Welfare Services?)	
<input type="checkbox"/> Regular Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Courier <input type="checkbox"/> Fax/Email <input type="checkbox"/> In Person	
As required, I have included a copy of the order(s) or notice(s) of removal I am appealing	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

3. Reasons for Appeal

Describe in detail the reasons for your appeal. Attach additional pages if you require more space.

4. Remedy

Describe in detail the remedy or action that you want the Board to consider. Attach additional pages if you require more space.

Please indicate whether you require either of the following services at the hearing

French language services Sign language services

5. Acknowledgement

Read carefully; then check the below box to confirm the statement, and sign and date the form.

I have completed all pages of this form and attached all the required documentation. I understand that if I submit an incomplete form or do not attach the required documents, my appeal may not be processed.

Name

Signature

Date (yyyy/mm/dd)

The Animal Care Review Board (ACRB) collects the personal information requested on this form under section 38 of the *Provincial Animal Welfare Services Act* and section 9(5) of Ontario Regulation 443/19 for the purpose of conducting an appeal proceeding before the ACRB. All information, including sensitive personal and financial information, submitted as part of a proceeding may become public in an open hearing and may be contained in decisions, orders, and case files, unless an order to restrict access is made. Any questions about the collection of information may be directed to the ACRB at ACRB.registrar@ontario.ca.

If you have any questions, please contact

Animal Care Review Board

15 Grosvenor St, Ground Fl

Toronto ON M7A 2G6

Telephone: 416-326-1356 / 1-888-444-0240

Teletypewriter (TTY): 1-800-855-0511

Website: tribunalsontario.ca/acrb

Email: ACRB.registrar@ontario.ca