



Tribunals Ontario

Assessment Review Board
15 Grosvenor Street, Ground Floor
Toronto, ON M7A 2G6
Email: arb.registrar@ontario.ca
Website: tribunalsontario.ca/arb

Request to Refer to AFRAAT

(Disponible en français)

We are committed to providing services as set out in the Accessibility for Ontarians with Disability Act, 2005. If you have any accessibility needs, please contact the Board as soon as possible.

If this form is not fully completed the Board will not review your request. Form is to be completed by MPAC.

Date request sent to the parties to complete (dd/mm/yyyy): _____

Date form submitted to Board (dd/mm/yyyy): _____

Name of MPAC representative and position title: _____

Part 1: Property/Appeal Information

Property Roll Number: _____

Appeal Number(s): _____

Property Address: _____

Tax Year(s) Requested: _____

Proceeding Type: Summary General

Part 2: AFRAAT Referral Requirements

For the appeal(s) to be referred to AFRAAT, all parties must consent to the following statements:

- 1. All parties consent that the land, or portion of the land, is "farm lands used only for farm purposes";
- 2. All parties agree on the total current value of the land;
- 3. All parties agree on property classes apportionment(s) to (if the assessment is apportioned or should be apportioned); and
- 4. All parties agree on the current value of each apportioned property class.

Attached is the signed agreement between MPAC and the Assessed Person(s) for the referral to AFRAAT.

Additional information/notes: _____

Please ensure all parties are copied when submitting this form.

Property Roll Number:

FOR INTERNAL USE ONLY

Approved for Referral

Denied for Referral

Signature: _____

Date & Time: _____