



## Part 1: Appeals to be Combined

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Provide a complete list of all the appeals that you are seeking to have combined pursuant to Rule 84.

1. Roll Number:

Property Location:

Appeal Number(s):

2. Roll Number:

Property Location:

Appeal Number(s):

3. Roll Number

Property Location:

Appeal Number(s)

4. Roll Number:

Property Location:

Appeal Number(s):

5. Roll Number:

Property Location:

Appeal Number(s):

If there are more than five properties to be combined, please attach a list of the remaining properties.



## Combined Appeals Form

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### Part 2: Common Questions of Fact, Law or Policy

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Please outline the common issues of fact, law or policy that would justify combining these appeals:

### Part 3: Parties' Position to the Request

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**Organization:**                      **Representative Name**

- MPAC:
- Municipality:
- Appellant:
- Other:

**Notes**

Consent	Oppose	No Position	No Response
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: If any of the parties oppose the request, please indicate who and why in the Supporting Information Section.

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### FOR INTERNAL USE ONLY:

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DV Name:

Combined Appeals:    Yes    No

Reasons:

Signature:

Date & Time: