

## DDABs (District Development Appeals Board) Questionnaire

Name of Municipality: \_\_\_\_\_

Contact person: \_\_\_\_\_

Phone number and Email address:

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1. *Does your municipality currently have a zoning bylaw?*

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\_\_\_\_\_

2. *Are you aware of your DAB (Development Appeals Board) and who sits on them?*

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\_\_\_\_\_

3. *Is your municipality interested in being part of a DDAB?*

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\_\_\_\_\_

4. *Do you have anyone in mind who would potentially sit on the board (Cannot be a municipal employee, but can be a councilor)?*

i. \_\_\_\_\_

ii. \_\_\_\_\_

iii. \_\_\_\_\_

5. Which municipalities would you like to see represented on your DDAB?

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6. Would your municipality be opposed to expanding the DDAB beyond the initially identified participants?

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7. When does your municipality appoint members to boards each year?

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8. Are you aware of any other DDABs in the province?

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9. Are there any specific further questions you have?

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