



**City Clerk Department**  
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# PETITION INFORMATION PACKAGE

## LOCAL IMPROVEMENTS

### AN INFORMATION PACKAGE FOR THE GENERAL PUBLIC

#### CAUTION

The reader is cautioned that this is information package is not a legal document. It is a summary of the petitioning requirements and is intended only as a guide.

Do not base decisions solely on the following information and sample forms. Use the forms in conjunction with the Municipal Government Act and/or appropriate legislation.

For a legal opinion, please consult a lawyer/solicitor.

February 2025

## **PROPERTY OWNERS' GUIDE**

### **WHAT ARE LOCAL IMPROVEMENTS?**

Local Improvements are new or replacement construction projects intended to upgrade or improve certain conditions within residential, commercial and industrial areas of the municipality. Some examples are street paving, driveway crossings, sidewalk replacement, lane paving, curb and gutter replacement, boulevards and street lighting, and extending sanitary, storm or water systems.

### **HOW ARE LOCAL IMPROVEMENTS GOVERNED?**

Sections 391 to 409 of the Municipal Government Act are the Provincial statutory guidelines for the administration of local improvements.

### **WHO MAY INITIATE A LOCAL IMPROVEMENT?**

Property Owners (the most common type of local improvement is a lane paving which is usually initiated by a property owner by petition), or

The City of Medicine Hat may initiate a local improvement. In either case, the City will send a notice to each affected property owner.

### **HOW DO I PETITION AGAINST A LOCAL IMPROVEMENT?**

If you have received notification of a proposed local improvement and you are opposed to the construction, please contact the City Clerk Department 403.529.8221 or [clerk@medicinehat.ca](mailto:clerk@medicinehat.ca).

### **WHO IS ASSESSED FOR LOCAL IMPROVEMENTS?**

Every property benefiting from a local improvement will share in the cost even if the property owner(s) have not signed the petition.

### **HOW IS THE ASSESSMENT DETERMINED?**

Funding for the local improvement is borrowed by the City of Medicine Hat and repaid by the affected assessed owners.

Property owners can pay this cost in one lump payment, thereby saving interest charges, or they may choose to pay the amount over 15 years with interest added to the annual property tax bill.

### **HOW DO I REQUEST A LOCAL IMPROVEMENT (i.e., lane paving)?**

1. A sample petition is attached as Appendix A.
2. To be valid the petition must be signed by 2/3 of the affected property owners who represent at least 1/2 the value of the total affected assessment according to the last revised assessment roll.

3. If a parcel of land is owned by more than one owner, the owners are considered as one owner.
4. Each signature must be witnessed by an adult person who signs:
  - a) opposite the signature of the petitioner, and
  - b) an affidavit that to the best of the person's knowledge that the signatures witnessed are those of persons entitled to sign the petition.
5. If a corporation, church, organization, estate, or other entity owns a property, the petition may be signed by a person who is at least 18 years of age and able to produce on request a certificate authorizing the person to sign the petition.
6. The completed petition form and affidavit must be returned to the City Clerk Department within **60 days** of initiating the petition. It is important to note that if a petition is returned and found to be insufficient, the petition cannot be sent out again for more signatures. The petition becomes invalid at that point and if the petitioner wants to have a local improvement; they will have to start from the beginning with a new petition.
7. The affected property owners will be notified in writing if petition is valid. The notification will contain the local improvement plan which includes the scope and estimated cost. A 30-day response period begins and if no petition against the improvement is made the project will be sent to Council for adoption. A Local Improvement Tax Bylaw will be prepared.

### **WHAT IF I DISAGREE WITH MY LOCAL IMPROVEMENT ASSESSMENT?**

Early in the year following construction, you will receive a Local Improvement Assessment Notice. You may file a complaint against your local improvement assessment to the Assessment Review Board in the same manner as you would file a complaint against your property assessment.

Some items that can be appealed are incorrect assessable footage and incorrect owners assessed.

In many cases, assessment concerns can be resolved without going through the complaint process. For this reason, we suggest that you phone the Assessment Department at 403.529.8114 to discuss the assessment before lodging your concerns, City representatives will be happy to meet with you to explain the assessment and review your concern. Resolving the issue in this manner can save time and expense for both you and the City.

*Note: A formal complaint can be made only once after the special assessment has been levied. The rates per foot cannot be appealed.*

### **FURTHER INFORMATION**

If you require further local improvement information, please contact the City Clerk Department 403.529.8221 or [clerk@medicinehat.ca](mailto:clerk@medicinehat.ca).

**PETITION BY ELECTORS**  
(Pursuant to the *Municipal Government Act* and amendments thereto)

**TO: THE COUNCIL OF THE MUNICIPALITY OF MEDICINE HAT, IN THE PROVINCE OF ALBERTA.**

The undersigned persons, being electors of the City of Medicine Hat, in the Province of Alberta, hereby petition the Council for/to:

**ACCURATELY STATE PURPOSE AND OBJECTIVES OF PETITION:**

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**EACH PETITIONER by signing this petition certifies that he (or she) is an elector of the City of Medicine Hat.** The personal information being collected may be disclosed if this petition is made public.

Signature of Petitioner	Printed Name	Street Address or Legal Land Description	I am an elector of this municipality	Date	Signature of Adult Witness

**NOTES:**

1. This form is a suggested form only and is prepared by Alberta Municipal Affairs for the information and convenience of interested individuals. It has no legislative effect. For certainty, legal advice should be sought when a petition is being considered.
2. Each page of the petition shall contain an accurate and identical statement of its purpose and objectives. As the wording of the petition is critical, legal advice should be obtained.

## PETITIONS ARE PUBLIC DOCUMENTS

1. In the absence of a municipal address, specify the legal description of the property on which the petitioner resides.
2. Each petitioner shall indicate that they are an eligible elector of the municipality by checking this field. An eligible elector is a Canadian citizen, over 18 years of age, and a resident of the municipality. (See section 47 of the *Local Authorities Election Act (LAEA)* for further information. In the case of summer village, see section 12 of the LAEA.)
3. Each person witnessing a signature on the petition must sign an Affidavit that, to the best of their belief, the persons whose signatures they witnessed are electors of the municipality. See Appendix B.

**AFFIDAVIT  
(WITNESS OF SIGNATURES)**

I, \_\_\_\_\_, pursuant to Section to the *Municipal Government Act* and amendments thereto, of the City of Medicine Hat, in the Province of Alberta, MAKE OATH AND SAY:

- 1. THAT I was personally present and did witness those signatures on the attached petition where I have signed my name as an adult person.
- 2. THAT to the best of my knowledge the persons whose signatures I have witnessed on this petition are electors of the City of Medicine Hat.

SWORN (or Affirmed) before me )  
 )  
 at the City of Medicine Hat )  
 )  
 in the Province of Alberta, )  
 )  
 this \_\_\_\_ day of \_\_\_\_\_ )  
 )  
 20\_\_\_\_. )  
 )  
 \_\_\_\_\_ )

\_\_\_\_\_  
 (Signature of person who witnessed signatures on the petition)

A Commissioner for Oaths/Notary  
 Public in and for the Province of Alberta

\*(PRINT OR STAMP NAME HERE)

MY APPOINTMENT EXPIRES \_\_\_\_\_

\*(Must be legibly printed or stamped).

**STATEMENT OF REPRESENTATIVE OF PETITIONERS**

(Pursuant to the *Municipal Government Act* and amendments thereto)

I, (name) \_\_\_\_\_, (current address including postal code) \_\_\_\_\_

\_\_\_\_\_

in the City of Medicine Hat in the Province of Alberta, state that I represent the petitioners and am the person to whom the municipality may direct any inquires regarding the petition.

DATED at the City of Medicine Hat in the Province of Alberta,

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Signature of Representative

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Printed Name)

**Note:** Use this as the last page of a Petition.