

Expert's Witness Statement

TLAB Case Number

The information collected on this form is considered to be a public record as defined by section 27 of the Municipal Freedom of Information and Protection of Privacy Act. The legal authority to make the information public is section 1.0.1. of the Planning Act. Questions about this form can be directed to the Manager, Planning & Liaison, Court Services, 137 Edward Street, 2nd Floor, Toronto, Ontario M5G 2P1 or by telephone at 416-338-7320.

Part 1: Location Information

Address and/or Legal Description of property subject to appeal

Street Number

Street Name

Postal Code

Part 2: Hearing Information

Hearing Date (yyyy-mm-dd)

Time of Hearing

Location of Hearing

Part 3: Expert Witness Information

First Name

Last Name

Company Name or Association Name (Association must be incorporated)

Professional Title

Email

Street Number

Street Name

Suite/Unit Number

City/Town

Province

Postal Code

Name of Retaining Party

Area of Expert Testimony

Part 4: Expert Witness Qualifications

Specify the area of expertise, reference an attached Curriculum Vitae and attached authored Reports (Documents), if any.
NOTE: An expert witness must file an 'Acknowledgement of Experts Duty', Form 6.

Expert's Witness Statement

Part 5: Evidence

(Provide a full disclosure statement by numbered paragraphs of intended evidence. Where applicable, relate and identify your opinion evidence to any application revisions identified in the Applicants Disclosure Form, the issues, Witness or Participants Statements filed and any reports, exhibits or Documents provided in Part 6.)

Part 6: List of Documents to be relied on or produced in the hearing

(List the documents)

Part 7: Signature of Expert Witness

Signature

Date

Part 9: I confirm that I or the Representative below identified have served this Witness Statement and the attached Documents on all the persons identified below:

First Name	Last Name	Email	Address
First Name	Last Name	Email	Address
First Name	Last Name	Email	Address
First Name	Last Name	Email	Address

Part 10: Signature of Party or Representative

Signature

Date (yyyy-mm-dd)

NOTE: An Expert's Witness Statement is required from every person intending to provide oral or written expert evidence on the matters in issue in this TLAB Case File.