

# Request to Summons Form 11

Questions or concerns about this form or process can be directed to the Toronto Local Appeal Body by telephone 416-392-4697 or by email at [tlab@toronto.ca](mailto:tlab@toronto.ca).

The information collected on this form is considered to be a public record. The legal authority to make the information public is section 1.0.1. of the Planning Act. As stated at Section 27 of the Municipal Freedom of Information and Privacy Act, the privacy provisions of Part 2 of the Act would not apply to any information collected on the form. Questions of this collection can be directed to the Manager of Planning & Liaison, Court Services, 137 Edward Street, 2nd Floor, Toronto, Ontario M5G 2P1 or by telephone at 416-338-7320.

## Part 1: Case Information

TLAB Case File Number	Hearing Date (yyyy-mm-dd)
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## Part 2: Requestor Information

First Name		Last Name	
<input type="checkbox"/> Check this box if First Name and Last Name do not apply to you because you have either a registered Birth Certificate or Change of Name Certificate bearing a Single Name. Provide your name below.			
Single Name			
Corporation Name or Association Name (Association must be incorporated)			
Email			
Street Number	Street Name		Suite/Unit Number
City/Town	Province	Postal Code	
Telephone Number		Mobile Number	
If the request is filed by a representative, please identify the Party below.			
Party First Name		Party Last Name	
<input type="checkbox"/> Check this box if First Name and Last Name do not apply to you because you have either a registered Birth Certificate or Change of Name Certificate bearing a Single Name. Provide your name below.			
Party Single Name			
Signature		Date (yyyy-mm-dd)	

# Request to Summons Form 11

## Part 3: Witness Information

First Name	Last Name	Position Title
<input type="checkbox"/> Check this box if First Name and Last Name do not apply to you because you have either a registered Birth Certificate or Change of Name Certificate bearing a Single Name. Provide your name below.		
Single Name		Position Title
Street Number	Street Name	Suite/Unit Number
City/Town	Province	Postal Code

## Part 4: Reason(s) for Request

Relevance of the Person to the matter before the Toronto Local Appeal Body (TLAB).

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## Part 4: Reason(s) for Request (Continued)

The issues and the evidence relevant to the issues before TLAB.

Detailed Information must be provided. If the TLAB Chair is not satisfied from the information provided that the evidence to be provided by the person is relevant to the issues before TLAB or is admissible, the summons shall not be issued.

## Instructions

The completed form must be returned to the Toronto Local Appeal Body by **email**. The TLAB's Rules of Practice and Procedure require that a summons be served at least SEVEN (7) days before the time the summonsed person is required to attend. A form must be completed for each person you are requesting approval to summons.

If your request is approved, you will be provided with a summons and instructions for service.

Please refer to the Toronto Local Appeal Body's Rules of Practice and Procedure for more information.

## Office Use Only

<input type="checkbox"/> Approved	<input type="checkbox"/> Request Further information	<input type="checkbox"/> Motion Required
Reviewing Panel Member Signature		Date (yyyy-mm-dd)