

## 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 <a href="mailto:tlab@toronto.ca">tlab@toronto.ca</a>.

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)				
Part 2: Requestor Information							
First Name			Last Name				
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 representati	ve, please identify	the Party below.				
Party First Name			Party Last Name				
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)					

311 toronto at your service

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Part 3: Witness Information							
First Name		Last Name		Position Title			
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						
		before the Toronto Local	Appeal Body	y (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							
Approved	Request Further information		Motion Required				
Reviewing Panel Member Signature		Date (yyyy-mm-dd)					

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