

Notice of Intention (Election) to be a Party or a Participant Form 4

TLAB Case File Number

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.

Information, including completed forms, disclosure documents and statements, you disclose to the Toronto Local Appeal Body (TLAB) in relation to a TLAB appeal is an adjudicative record that is a public record available to parties, participants and the general public. As stated in Section 27 of the Municipal Freedom of Information and Protection of Privacy Act, the provisions protecting individual privacy in Part 2 of that Act do not apply to any information collected in the TLAB's prescribed forms and associated filings for appeals.

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: Your Contact Address and Email		
Street Number	Street Name	Postal Code
Email		

Part 2: Party, Participant or Representative's 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 if any (Association must be incorporated)		
Position Title (if applicable)		Email
Street Number	Street Name	Suite/Unit Number
City/Town	Province	Postal Code

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Part 3: Notice of Intention to be a Party

Important: If you or any person on your behalf intends to give evidence at the TLAB Hearing, a Witness Statement (Form 12) is required to be filed in accordance with the Rules. In addition, if you have a Representative, Form 5 must be completed.

I wish to give notice of my intention to be a Party to the above referenced TLAB Case File Number.

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

Corporation or Association Name of Party if any (Association must be incorporated)

Date (yyyy-mm-dd)

Part 4: Notice of Intention to be a Participant

Important: If you or any person on your behalf intends to give evidence at the TLAB Hearing, a Participant Statement (Form 13) is required to be filed in accordance with the Rules. In addition, if you have a Representative, Form 5 must be completed.

I wish to give notice of my intention to be a Participant to the above referenced TLAB Case File Number.

Participant First Name

Participant 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.

Participant Single Name

Corporation or Association Name of Participant if any (Association must be incorporated)

Date (yyyy-mm-dd)

Note: The expression of intention in this Form governs unless there is an order of the TLAB to the contrary. For responsibilities and opportunities of a Party, see Rule 12.6. For rights and privileges of a Participant, see Rule 13.7.