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| **SUPERIOR COUR OF JUSTICE**  **REQUISITION TO ATTEND TRIAGE COURT (Civil and Family)** | | | |
| *SELECT APPROPRIATE COURT LOCATION:*  Brampton SCJ Courthouse 7755 Hurontario Street, Suite 100 Brampton, ON L6W 4T6 Email: [scjtrialofficebrampton@ontario.ca](mailto:scjtrialofficebrampton@ontario.ca) | | | Milton SCJ Courthouse 491 Steeles Ave East Milton, ON L9T 1Y7 Email: [SCJHaltontrialoffice@ontario.ca](mailto:SCJHaltontrialoffice@ontario.ca) |
| Requisition to Attend a Triage Court before a Judge to Schedule (select one of the following): | | | |
|  | **Family Consent Matters**  **Requests for Urgent Motion Hearing date or timetable (Civil and Family)**  **Hearing Date for Long Motion or Application (only if all parties ready or ordered by the Court)**  **Hearing Date for Summary Judgment Motion (only if all parties ready or ordered by the Court)**  **Timetable to be set by the Court** | | |
| **IMPORTANT -** Please return this completed form in **Microsoft Word format** by email:   * For Brampton to: [scjtrialofficebrampton@ontario.ca](mailto:scjtrialofficebrampton@ontario.ca). In Brampton, Triage Court will be held virtually every Tuesday at 9:00 am. * For Milton to: [SCJHaltontrialoffice@ontario.ca](mailto:SCJHaltontrialoffice@ontario.ca). In Milton, Triage Court will be held virtually every Thursday at 9:00 am.   Upon receipt of this requisition, the Trial Office will email you the Triage Court date and Zoom details. | | | |
| **Court File Number:** | | | |
| **Full Title of Proceeding (List all Parties in the Title of Proceeding):** | | | |
|  | | | |
| **Moving Party Is:** | | | |
|  | | **Plaintiff/Applicant/Appellant:** | |
|  | | **Defendant/Respondent:** | |
|  | | **Other:** | |

**REASON FOR THE ATTENDANCE AT TRIAGE COURT**

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| 1. Describe issue to be decided/set by Triage Court. | | | Click or tap here to enter text. |
| 1. Whether it is on Consent? | | | Yes.  No. |
| 1. Is the Motion seeking Summary Judgment? | | | Yes.  No. |
| 1. Is any party self-represented? If so, which party(s)? | | | Yes.  No.  Self-represented party(s): Click or tap here to enter text. |
| **Name of Party and Lawyer Scheduling the Motion:** |  |  | |
|  |  | Name and Firm (please type or print clearly) | |
| YYYY-MM-DD |  |  | |
| Date |  | Telephone Number and Email Address | |

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| **Name of Party and Lawyer Responding:** |  |  |
|  |  | Name and Firm (please type or print clearly) |
|  |  |  |
|  |  | Telephone Number and Email Address |
| **Name of Party and Lawyer Responding:** |  |  |
|  |  | Name and Firm (please type or print clearly) |
|  |  |  |
|  |  | Telephone Number and Email Address |
| **LIST ANY OTHER INTERESTED PARTIES AND THEIR CONTACT INFORMATION** |  |  |
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| **For Court Use Only** |

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| **ONTARIO SUPERIOR COURT OF JUSTICE** | **TRIAGE COURT ENDORSEMENT** | |
| **BRAMPTON** | **Court File No.:** Click or tap here to enter text. | |
| **MILTON** |  | |
| Click or tap here to enter text. | | |
| **Presiding Judge:** |  |  |
| **JUSTICE** Click or tap here to enter text. | **DATE:** | YYYY-MM-DD |
|  |  |  |

Counsel attending (if different than listed above):

Plaintiff/Applicant:

Defendant/Respondent:

Other Interested Parties:

**ENDORSEMENT**

All material/documents and confirmation forms are to be filed in accordance with the Rules and the current Consolidated Practice Direction for Central West Region.

**(where applicable) The Timetable Schedule set out on the next page is ordered.**

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| **DATE:** | **Judge’s Signature** |  |

| **BRAMPTON** | **Court File No.:** Click or tap here to enter text. |
| --- | --- |
| **MILTON** |  |

**TIMETABLE SCHEDULE**

**PART 1: GETTING READY TO PROCEED TO A HEARING:**

* **MOVING PARTY’S MOTION RECORD or APPLICATION RECORD, TO BE DELIVERED BY:**
* **RESPONDING PARTY RECORD TO BE DELIVERED BY:**
* **REPLY RECORD, IF ANY, TO BE DELIVERED BY:**
* **CROSS-EXAMINATIONS, IF ANY, TO BE COMPLETED BY:**
* **UNDERTAKINGS TO BE ANSWERED (within 30 days of completion of the examination or as otherwise expressly ordered by the Court by this date):**
* **COMPLETE MOTION RECORD FOR REFUSALS TO BE SERVED (within 30 days of completion of the examination or otherwise deemed abandoned):**
* **MOVING PARTY OR APPLICANT’S FACTUM TO BE DELIVERED BY (will be set by the Court upon being granted a hearing date):**
* **RESPONDING PARTY FACTUM TO BE DELIVERED BY (will be set by the Court upon being granted a hearing date):**

**PART 2: OBTAINING A HEARING DATE (only once the parties confirm they are ready to proceed to the hearing or as directed by the Court):**

* **APPROVED HEARING DATE:**
* **In exceptional circumstances, parties may discuss the timetable for the exchange of factums on the date they obtain their motion date.**

**PART 3: ANY ADDITIONAL TIMETABLE DIRECTIONS:**

**THE TIMETABLE MUST BE COMPLIED WITH UNLESS THE PARTIES AGREE IN WRITING TO VARY THE DATE BUT SUCH VARIATION MUST NOT VARY OR PUT AT RISK OF NOT PROCEEDING ANY HEARING DATE SET BY THE COURT.**

**THE PARTIES SHALL COMPLY WITH ALL PRACTICE DIRECTIONS/ NOTICE TO THE PROFESSION ISSUED FOR THE CENTRAL WEST REGION APPLICABLE TO THIS MOTION OR APPLICATION, INCLUDING THE REQUIREMENTS FOR FILING DOCUMENTS AND UPLOADING THEM TO CASE CENTER.**