

**Ontario Land Tribunal**

655 Bay Street, Suite 1500, Toronto, ON M5G 1E5

Tel: 416 212-6349 | 1 866 448-2248

Web Site: olt.gov.on.ca

**Request for Adjournment**

Before submitting this form, rule 17 of the Ontario Land Tribunal’s [Rules of Practice and Procedure](https://olt.gov.on.ca/about-olt/law-policy/) should be reviewed.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Request:** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Case Information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OLT Case No.: | | | | | Hearing Date: | | | | | | | | | | | | | | | Municipality: | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Request can only be made by Party or Representative** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name: | | | | | | | | | | | First Name: | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Email Address: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Daytime Telephone Number: | | | | | | | | | | | | Alternative Telephone Number: | | | | | | | | | | | | | | | | |
|  | | | | Ext. |  | | | | | | |  | | | | | | | | | | | | | | | | |
| **Mailing Address** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unit Number: | | Street Number: | | | | | | | | | | Street Name: | | | | | | | | | | | | | | P.O. Box | | |
|  | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | |
| City/Town: | | | | | | Province: | | | | | | | | | | | | Country: | | | | | | Postal Code: | | | | |
|  | | | | | |  | | | | | | | | | | | |  | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Party (please check appropriate box)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Applicant |  | Appellant | | | | |  | Municipality | | | | | |  | | Other | | |  | | | | | | | | | |
| If filing the request as a representative, please identify your client (party): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Reasons in support of the request to adjourn:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If the Tribunal directed you to provide notice of the hearing event, has notice been given? | | | | | | | | | | | | | | | | | | | | | Yes |  | No | |  | | N/A |  |
| Consent from all parties obtained and attached? | | | | | | | | | | Yes | | |  | | No | |  | | | | | | | | | | | |
| If No, please provide details: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Request to Adjourn to: (Month, Year) | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Suggested Dates: (Agreeable to all parties) | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Please return the completed form and any supporting documents to the Tribunal’s Office by email where possible. If unable to supply via email, please provide via mail. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |