



Ontario

Ontario Municipal Board
Commission des affaires municipales de l'Ontario

Request for Issuance of a Summons to Witness

The completed form must be returned to the Board's Information Office by mail or fax at (416)326-5370.

OMB Case No.: _____ Hearing Date: _____ Municipality: _____

Requester (Party or Representative)

Name: _____

Address: _____

Phone: Bus.: _____ Res.: _____

If this request is being filed by a representative, please identify the client (party)

Witness(es) for whom a summons is being requested:

Name: _____

Address: _____

Note the relationship and relevance of the evidence to the case of the individual to be served.

Approved by _____ Date: _____