

**NOTICE OF MOTION  
AVIS DE MOTION**

BETWEEN \_\_\_\_\_ Prosecutor  
*ENTRE* \_\_\_\_\_ *Poursuivant*

and  
*et*

Defendant  
*Défendeur*

TAKE NOTICE that an application will be made by the \_\_\_\_\_  
*SACHEZ QU'UNE requête sera déposée par* \_\_\_\_\_ *(Prosecutor/Defendant) / (poursuivant/défendeur)*

on \_\_\_\_\_, yr. \_\_\_\_\_, before the Ontario Court of Justice  
*le* \_\_\_\_\_ *an* \_\_\_\_\_ *devant la Cour de justice de l'Ontario*

at \_\_\_\_\_  
*à* \_\_\_\_\_

in the following matter: / *en ce qui concerne l'affaire suivant :*

for an Order as follows: / *pour une ordonnance comme suit :*

And further take notice that in support of this application will be read the affidavit of \_\_\_\_\_  
*Sachez aussi qu'à l'appui de cette requête sera lu l'affidavit de*

\_\_\_\_\_, and such other and further evidence as may be required.  
*ainsi que d'autres preuves qui s'avèreront nécessaires.*

Dated this \_\_\_\_\_ day of \_\_\_\_\_, yr. \_\_\_\_\_  
*Fait le* \_\_\_\_\_ *jour de* \_\_\_\_\_ *an* \_\_\_\_\_

at \_\_\_\_\_  
*à* \_\_\_\_\_

Signed \_\_\_\_\_  
*Signature*

Address \_\_\_\_\_  
*Adresse*

TO: / *À :*  
**Prosecutor (or Defendant) and Clerk of the Court**  
***Poursuivant (ou Défendeur) et au greffier de la Cour***

**DISTRIBUTION:**

**Defendant/Prosecutor**  
***défendeur/poursuivant***

Counsel for **Defendant/Prosecutor**  
***avocat du défendeur/poursuivant***

Agent for **Defendant/Prosecutor**  
***mandataire du défendeur/poursuivant***

FOR INFORMATION ON ACCESS  
TO ONTARIO COURTS  
FOR PERSONS WITH DISABILITIES, CALL  
**1-800-387-4456**  
TORONTO AREA 416-326-0111



POUR PLUS DE RENSEIGNEMENTS SUR L'ACCÈS  
DES PERSONNES HANDICAPÉES  
AUX TRIBUNAUX DE L'ONTARIO, COMPOSEZ LE  
**1-800-387-4456**  
RÉGION DE TORONTO 416-326-0111



Ministry of  
the Attorney  
General

*Ministère du  
Procureur  
général*

**GENERAL FORM FOR AFFIDAVIT  
FORMULE GÉNÉRALE D’AFFIDAVIT**

I, \_\_\_\_\_  
*Je soussigné(e),*

of  
*de*

make oath and say as follows:  
*déclare sous serment que :*

\_\_\_\_\_  
Signature

Sworn by the said \_\_\_\_\_  
*Déclaré sous serment par*

before me, \_\_\_\_\_  
*devant moi*

at \_\_\_\_\_  
*dans le/la*

on the \_\_\_\_\_ day of \_\_\_\_\_, yr. \_\_\_\_\_  
*le \_\_\_\_\_ jour de \_\_\_\_\_ an*

\_\_\_\_\_  
(A commissioner, etc. / *Commissaire, etc.*)



## Affidavit of Service

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I, \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_

MAKE OATH AND SAY THAT I DID on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_,

Serve \_\_\_\_\_

with a true copy of the within notice in the manner indicated below: namely,

\_\_\_ by delivering it to him/her personally

\_\_\_ by mailing it by ordinary/registered mail to \_\_\_\_\_

at his/her last known or usual place of abode.

\_\_\_ by forwarding by facsimile transmission to fax No. \_\_\_\_\_

SWORN BEFORE ME AT THE )

City of \_\_\_\_\_ )

County of \_\_\_\_\_ )

This \_\_\_\_ day of \_\_\_\_\_ )

\_\_\_\_\_ 20\_\_\_\_ )