

# SUPERIOR COURT – District of Montreal

## REQUEST FOR A HEARING IN FAMILY MATTERS FORM

Court file number: 500 - \_\_\_\_\_

**IMPORTANT:** Only one form per file must be sent per date of presentation on the roll, and a new form per file must be sent for each new date of presentation. The party that initiated the application submitted to the court (or the first to be notified if there is more than one application to be presented on the same day) must fill out all sections of this form and send it to the email address [courpratique-217@justice.gouv.qc.ca](mailto:courpratique-217@justice.gouv.qc.ca) with a copy of the email sent c.c. to the adverse party only between 8:00 a.m. and 12:30 p.m. the last working day before the date of presentation.

**1**

Proceedings on the roll of \_\_\_\_\_ of Courtroom 2.17  
(date)

Uncontested application(s)

Contested application(s)

[check all that apply]

Application for a safeguard order

Date of service/notification:  
\_\_\_\_\_

Contested extension and/or amendment of a safeguard order

Case management notice

Cease representing/Substitution of attorney

Trial set for: \_\_\_\_\_

Disclosure of documents

Request for special case management

Request for undertakings

Psychosocial assessment

Establishing a case protocol

Application to dismiss

Declinatory exception

Appointment of an attorney for the child

Contempt of court

Extension of a time limit

Number of previous extensions: \_\_\_\_\_

Modified Case Protocol attached herewith: Yes  No

Are you asking to be exempt from filing one?

Explain briefly: \_\_\_\_\_

Extension of a subpoena

Relief from failure to set down for trial

Contested application for postponement

Postponement of hearing scheduled in 2.01 or 15.07 on \_\_\_\_\_

Revocation of judgment

Suspension of proceedings

Number of previous suspensions: \_\_\_\_\_

Other: \_\_\_\_\_

Specify those that are contested: \_\_\_\_\_

**2**

### Time required for submissions

Duration: Plaintiff/applicant: \_\_\_\_\_ Defence: \_\_\_\_\_ Other: \_\_\_\_\_

Reading time: \_\_\_\_\_ TOTAL DURATION: \_\_\_\_\_

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### Contact information of the attorneys making representations before the Court

Name of attorney: \_\_\_\_\_

Name of party represented: \_\_\_\_\_

Telephone (direct): \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Name of attorney: \_\_\_\_\_

Name of party represented: \_\_\_\_\_

Telephone (direct): \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Name of attorney: \_\_\_\_\_

Name of party represented: \_\_\_\_\_

Telephone (direct): \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Name of attorney: \_\_\_\_\_

Name of party represented: \_\_\_\_\_

Telephone (direct): \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

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### Contact information of unrepresented parties

Name of party: \_\_\_\_\_

Telephone (direct): \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Name of party: \_\_\_\_\_

Telephone (direct): \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

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**Previous settlement attempts**

Have you attempted to settle the application(s)?  yes  no

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**Filing of documents**

I certify that all of the proceedings, exhibits, affidavits, and other documents required were filed at the court office at least two working days before the date of presentation  yes  no

I certify that the documents authorized in the Revised Communiqué have been transmitted to [production-tardive.familial.cs@judex.qc.ca](mailto:production-tardive.familial.cs@judex.qc.ca)  yes  no  n/a

I certify that an authorization from the court will be sought to send documents to [production-tardive.familial.cs@judex.qc.ca](mailto:production-tardive.familial.cs@judex.qc.ca)  yes  no  n/a

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**Confirmation**

By checking the box that follows, I, \_\_\_\_\_, confirm that I have obtained the name of attorney responsible for the file adverse party's consent to submit this form, his or her time required for submissions, and the other information above.

If the adverse party's consent was not obtained, please set out the reasons:

\_\_\_\_\_  
\_\_\_\_\_

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**Authorization to proceed in person**

Who is making the request: \_\_\_\_\_

Set out the reasons justifying attendance in person:

\_\_\_\_\_  
\_\_\_\_\_