

Financial Services Tribunal

Form 1.1 - Request for Hearing Financial Hardship Proceeding For hearings before the

Financial Services Tribunal

Instructions and Important information about Financial Hardship Proceedings

Please read all of the following important information before you complete and submit this form to the Registrar.

Use this Form 1.1 to request a hearing before the Financial Services Tribunal about an intended decision of the Chief Executive Officer of the Financial Services Regulatory Authority of Ontario if you are the financial institution that has refused a request (in whole or in part) by the Owner of an Ontario locked-in retirement account, life income fund or locked-in retirement income fund (referred to herein as a "locked-in account") for consent to withdraw money from a locked-in account based on financial hardship, and the CEO has sent you a Notice of Intended Decision to require you to make payment from the locked-in account, and you want a hearing before this Tribunal to dispute the CEO's Notice of Intended Decision in whole or in part.

Complete the form and send it with any additional documents to the Registrar of the Financial Services Tribunal within 30 calendar days after you receive the CEO's Notice of Intended Decision by mail, e-mail or fax to:

The Registrar Financial Services Tribunal 25 Sheppard Ave W, 7th Floor, Suite 100 Toronto, Ontario, M2N 6S6 Fax: (416) 226-7750 Email: <u>contact@fstontario.ca</u>

Do not send any documents to the CEO directly.

Sending documents by Fax

If you send any document to the Registrar by fax, the fax should include a cover page indicating:

- the name, address and phone number of the sender,
- that the fax is being sent to the Registrar,
- the date and time the document is transmitted,
- the total number of pages transmitted including the cover page,
- the fax number from which the document is transmitted, and
- the name and phone number of a person to contact if problems arise with the transmission of the fax.

Procedures

You may represent yourself before the Financial Services Tribunal or you may be represented by someone who is licensed under the Law Society Act to practice law or to provide legal services in Ontario (i.e. a lawyer or paralegal) or by someone who is not required to be licensed under that Act (e.g. a trade union representative or a friend helping out on a voluntary basis.). If you are not sure whether or not a person can act as your representative (e.g. he or she is not a lawyer or a licensed paralegal), you should contact the Law Society of Ontario: (416) 947-3300, or 1-800-668-7380, or lawsociety@lso.ca. The Financial Services Tribunal cannot assist you in obtaining representation and cannot provide you with information about the authority or licence status of a representative.

The <u>Tribunal's Rules of Practice and Procedure for Proceedings Before the Financial Services Tribunal</u> will apply to the proceedings except for Rules 8.09, 9, 11, 15 to 24 and 26 to 42 unless the Tribunal orders otherwise.

When the Registrar receives your Request for Hearing Form 1.1 a copy of it and any attachments will be sent to the CEO and to the Owner of the locked-in account ("Owner"). The Owner of the locked-in account will be invited to file an application to become a party and participate in the proceedings.

The Financial Hardship Proceeding shall be conducted as a written hearing unless the Tribunal determines it should be conducted in a different manner. The proceedings will not be open to the public. The Tribunal expedites requests for hearings on decisions by the Superintendent regarding access to locked-in funds in cases of financial hardship.

Personal information requested is necessary for the proper administration of a lawfully authorized activity and is collected under the authority of the *Financial Services Tribunal Act, 2017*. This information will be used for the purposes of the proceeding and will be available to all parties to the proceeding. Any personal information collected must be held in confidence by all parties to the proceeding and their representatives and the Tribunal.

The Tribunal's orders are posted publicly on the internet but will not contain the name of the Owner of the locked-in account or contain any other information by which the Owner can be identified. The order shall be published by the Tribunal after being communicated to all parties. A decision and order with respect to a financial hardship proceeding may be made by a single member of the Tribunal as assigned by the Chair.

Calculating time

If the day that the Registrar is due to receive a document falls on a Saturday, Sunday or holiday, the due date for receipt of the document becomes the next day that is not a Saturday, Sunday or holiday.

If a document is received by the Registrar after 4:45 p.m., it will be deemed to have been received by the Registrar on the following day.

If a document is sent by first class mail, the person to whom the document is addressed will be deemed to have received the document on the seventh calendar day after the document is mailed.

Withdrawal of a request for a hearing

You can withdraw your request for a hearing at any time before the Financial Services Tribunal makes a decision and order by sending a letter requesting the withdrawal signed by you or your representative to the Tribunal Registrar.

For more information

For more information about requesting a hearing or if you have any questions about your hearing, please contact the Registrar at (416) 590-7294 or toll free at 1-800-668-0128 or visit the Tribunal's website at <u>www.fstontario.ca</u>

NOTE: You are required to fill out ALL sections of this form as completely as possible.



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Tribunal File Number

(The Registrar of the Financial Services Tribunal will complete this box.)

(Applicant) - Financial Institution's Name and Address and Contact Person

Name of Financial Institution

Street Address				Apt./Unit
City		Province		Postal Code/ZIP
Contact Person				
La	st Name		First Name	
Phone Number	Ext.	Fax Number	Email Address	
Financial Institutio	on's Represe	ntative (if any)		
Las	at Name		First Name	
Firm				
Street Address				Apt./Unit
City		Province		Postal Code/ZIP
Phone Number	Ext.	Fax Number	Email Address	
The Representative is	5:			
⊖ Lawyer				
O Paralegal licensed	to provide legals	service		

O Not required to be licensed under the *Law Society Act* and its By-Laws

Name and Address of the Owner of the Locked-In Account							
Last Name			First Name				
Street Address				Apt./Unit			
City		Province		Postal Code/ZIP			
Phone Number	Ext.	Fax Number	Email Address				

Why do you disagree with the CEO's proposed decision?

Explain why you disagree with what the CEO is proposing to do.

What do you want the Tribunal to decide or order?

Explain as precisely as possible what decision you want the Tribunal to make. Use point form if desired.

Documents

Attach the following documents to this form, if available. Check the boxes to indicate if the documents are attached:

- A copy of the CEOs Notice of Intended Decision
- A copy of the application you received from the Owner of the locked-in account, including any supporting documents attached to it
- A copy of any correspondence between yourself and the Owner of the locked-in account regarding your refusal of the Owner's application

If any other documents are attached to this form, describe:

French and Accessibility Requirements

A person has the right to communicate with the Registrar's office and at hearings in French as provided in the *French Language Services Act*. If a person intends to communicate in French as a party in a proceeding, the person shall indicate this intention in the Request for Hearing or in a letter filed with the Registrar as early as is practicable.

Do you intend to communicate in French?

⊖Yes

⊖No

Do you have any accessibility requirements for the proceeding? (e.g., wheel chair access, sign language interpreter, visual aids or any other accommodation)

<u>~</u>
5

⊖No

If yes, please describe

Signature

Appellant Name (please print)	Appellant Signature	Date (yyyy-mm-dd)
Representative Name (please print)	Representative Signature	Date (yyyy-mm-dd)