SUPERIOR COURT - District of Montreal

REQUEST FOR A HEARING IN CIVIL MATTERS FORM

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 attach it to an email message sent to the address: cour-pratique.216@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 Proceeding(s) on the roll of _______ in Courtroom 2.16 (date)

1 Proceeding(s) on the roll of	in Courtroom 2.16 (date)
☐ Uncontested application(s) ☐ Contested application(s) [check all that apply]	
Quashing of seizure/stay of execution Case management notice Suretyship for costs Cease representing/Substitution of attorney Trial set for: Disclosure of documents Communication of exhibits/particulars Request for special case management Fixing a case protocol Injunction Exception to dismiss Consolidation/separation of proceedings Application to amend a pleading Declinatory exception Objections	Contempt of court Extension of a subpoena Renewal of safeguard/interim order Relief from default Nature of default: Postponement of hearing scheduled in 2.08 or 15.07 on Contested postponement Revocation of judgment 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: Suspension of proceedings Number of previous suspensions: Other Other
Specify those that are contested: Time required for submissions for all proceedings on the roll	
Duration: Plaintiff/applicant:Defence	e:Other:
Reading time:TOTAL DURATIO	
Contact information of the attorneys making representations before the Court	
Name of attorney:	Name of attorney:Name of party represented
Name of party represented Telephone (direct):	Name of party represented Telephone (direct):
Cell:	Cell:
Email:	Email:
Name of attorney:	Name of attorney
Name of attorney:	Name of attorney:Name of party represented
Telephone (direct):	Telephone (direct):
Cell:Email:	Cell: Email:
Ciliali.	Eilidii
Name of attorney:	Name of attorney:
Name of party represented	Name of party represented
Telephone (direct):	Telephone (direct):
Cell:Email:	Cell: _ Email:
4 Contact information of unrepresented parties	
Name of party:	Name of party:
Telephone (direct):	Telephone (direct):
Cell:	Cell: Email:
Email:	Email:
5 Previous	settlement attempts

 \square yes

□no

1

Have you attempted to settle the application(s)?

6

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 \square yes \square no	
I certify that the documents authorized in the Revised Communiqué have been transmitted to	
I certify that an authorization from the court will be sought to send documents to production-tardive.civil.cs@judex.qc.ca □ yes □ no □ n/a	
7 Confirmation	
By checking the box that follows, I,, confirm that I have obtained the adverse name of attorney responsible for the file 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:	
8 Authorization to proceed in person Who is making the request:	
Set out the reasons justifying attendance in person:	

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