



FORM 21

[Section 24]

**REPLY**

RE APPLICATION BY \_\_\_\_\_

*(State here name of applicant.)*

DATED THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_ TO THE LABOUR RELATIONS BOARD

FOR AN ORDER \_\_\_\_\_

*(State here briefly as to order applied for e.g. "for certification".)*

1. This reply is made by \_\_\_\_\_

*name*

of \_\_\_\_\_

*no. street city/town province postal code*

*telephone alternate phone number email address*

2. With respect to the application, the following statements are specifically admitted:

(a) \_\_\_\_\_

(b) \_\_\_\_\_

(c) \_\_\_\_\_

etc.

3. The following statements are specifically denied:

(a) \_\_\_\_\_

(b) \_\_\_\_\_

(c) \_\_\_\_\_

etc.

4. The following statements are specifically commented on:

(a) \_\_\_\_\_

Comment: \_\_\_\_\_

(b) \_\_\_\_\_

Comment: \_\_\_\_\_

(c) \_\_\_\_\_

Comment: \_\_\_\_\_

5. The following is a concise statement of the material facts which are intended to be relied on in support of this reply:

(a) \_\_\_\_\_

(b) \_\_\_\_\_

(c) \_\_\_\_\_

etc.

I, the undersigned, swear (or affirm) that the submissions set forth above are, in so far as they are matters of fact, true and complete to the best of my knowledge and, in so far as they are matters of opinion, are reasonably and honestly believed by me.

SWORN (OR AFFIRMED) BEFORE ME

at \_\_\_\_\_, Saskatchewan,

this \_\_\_\_\_ day of \_\_\_\_\_,

20\_\_\_\_.

\_\_\_\_\_  
Notary Public or Commissioner for Oaths for Saskatchewan

My Commission Expires: \_\_\_\_\_



\_\_\_\_\_  
*signature*

CONTACT INFORMATION AND ADDRESS FOR SERVICE

If the reply is not made an individual, indicate the name, address and contact information of the individual swearing or affirming the document.

Name: \_\_\_\_\_

Position Held: \_\_\_\_\_

Address: \_\_\_\_\_  
*no. street city/town province postal code*

Telephone: \_\_\_\_\_

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

If the party filing the reply is represented by legal counsel, also indicate the name and address for service of the applicant's lawyer.

Lawyer: \_\_\_\_\_

Address: \_\_\_\_\_  
*no. street city/town province postal code*

Telephone: \_\_\_\_\_

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