

# REOPENING APPLICATION/AFFIDAVIT

Under subsection 11(1) of the *Provincial Offences Act*

I, \_\_\_\_\_  
(name)  
of \_\_\_\_\_  
(street number) (street) (apt. number) (municipality) (postal code)  
\_\_\_\_\_  
(phone) (email)

make an application to strike out the conviction entered against me. In support I confirm and assert as follows:

1. I was convicted without a hearing of

| Offence Description | File No.        |
|---------------------|-----------------|
|                     |                 |
| Offence Date        | Conviction Date |
|                     |                 |

2. Through no fault of my own,

(a) I did not have the opportunity to *(check the appropriate box)*:

- dispute the charge at trial, or
- appear before a justice to enter a plea of guilty and make submissions as to penalty

*(explain or attach other evidence or information to be relied upon in support of your application)*

**OR**

(b) I did not receive delivery of a notice or document relating to the offence, namely *(check the appropriate box)*:

- Offence Notice

And I wish to exercise one of the following options:

- Plea of Guilty with Submissions as to Penalty:** I want to appear before a justice to enter a plea of guilty and make submissions as to penalty (amount of fine or time to pay).

**NOTE:** *If you do not appear before a justice to enter a plea of guilty and make submissions as to penalty at the times and days given to you within 15 days of the date of the granting of the reopening, you will be deemed not to dispute the charge and may be convicted in your absence.*

- Trial Option:** I intend to appear in court to enter a plea of not guilty at the time and place set for the trial.

**NOTE:** *You may be convicted in your absence if you do not attend the trial.*

- Notice of Trial

*(explain or attach other evidence or information to be relied upon in support of your application)*

3. The conviction first came to my attention on the \_\_\_\_\_ day of \_\_\_\_\_, yr. \_\_\_\_\_.

4.  I have made a previous application for reopening in relation to this matter.



Sworn/Affirmed before me

at .....

this ..... day of ....., 20 .....

\_\_\_\_\_  
A Commissioner, etc.

\_\_\_\_\_  
Signature of defendant

**NOTE:** Section 86 of the *Provincial Offences Act* provides:

Every person who makes an assertion of fact in a statement or entry in a document or form for use under this Act knowing that the assertion is false is guilty of an offence and on conviction is liable to a fine of not more than \$2,000.

Subsections 11 (2) and (3) authorize the clerk of the court or justice to strike out a conviction on affidavit of the defendant or on other evidence or information that through no fault of the defendant, the defendant was unable to participate in the proceeding.

**The court may contact you regarding this application using the phone number or e-mail address provided.**

**FOR COURT USE ONLY**

**ORDER OF THE CLERK**

- Application forwarded to justice.
- Conviction struck, reopening granted. Certificate of striking out conviction and information about appearing before a justice of the peace to enter a plea of guilty and speak to sentence to be given to defendant.
- Conviction struck, reopening granted. Certificate of striking out conviction and notice of trial to be given to defendant and prosecutor.

.....  
Date

\_\_\_\_\_  
Signature of Clerk of the Court

**ORDER OF THE JUSTICE**

- Conviction upheld, reopening denied.  
Reason:
- Conviction struck, reopening granted. Certificate of striking out conviction and information about appearing before a justice of the peace to enter a plea of guilty and speak to sentence to be given to defendant.
- Conviction struck, reopening granted. Certificate of striking out conviction and notice of trial to be given to defendant and prosecutor.

.....  
Date

\_\_\_\_\_  
Signature of Justice of the Peace

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