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| *ONTARIO* | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Superior Court of Justice** | | | | | | | | | | | | | Request to Clerk | | | | | | | | | | | | | |
|  | | | | | | Form 9B Ont. Reg. No*.*: 258/98 | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | |  |  | | | | | | | |
|  | | | | | | Small Claims Court | | | | | | | | | | | |  | Claim No. | | | | | | | |
|  | | | | | |  | | | | | | | | | | | |  |  | | | | | | | |
|  | | | | | | Address | | | | | | | | | | | |  |  | | | | | | | |
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|  | | | | | | Phone number | | | | | | | | | | | |  |  | | | | | | | |
| **BETWEEN** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Plaintiff(s) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **and** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Defendant(s) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **TO THE CLERK OF THE** | | | | |  | | | | | | | | | | | | | | | | | **SMALL CLAIMS COURT:** | | | | |
|  | | | | | (Name of Small Claims Court location) | | | | | | | | | | | | | | | | |  | | | | |
| **My name is** | | |  | | | | | | | | | | | | | **and I request that the clerk of the court:** | | | | | | | | | | |
|  | | | (Name of party/representative) | | | | | | | | | | | | |  | | | | | | | | | | |
| *(Check appropriate box(es).)* | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | note defendant(s) | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | (Name of defendant(s)) | | | | | | | | | | | | | | | | | | | | | | |
|  | in default for failing to file a Defence (Form 9A) within the prescribed time period [R. 11.01(1)]. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | schedule an assessment hearing (all defendants have been noted in default) [R. 11.03(2)(b)]. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | schedule a terms of payment hearing because I dispute the defendant’s proposed terms of payment contained in the Defence (Form 9A) [R. 9.03(3)]. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | schedule a trial [R. 16.01(1)(b)]. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | accept payment in the amount of $ | | | | | | | |  | | | | | into court | | | | | | | | | | | | |
|  |  | | | | | | | | (Amount) | | | | |  | | | | | | | | | | | | |
|  |  | according to an order of the court, dated | | | | | | | | | |  | | | | | , 20 | | |  | | | . | | | |
|  |  | for a person under disability according to an order or settlement dated | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  | | | | | | , 20 | |  | [R. 4.08(1)]. | | | | | | | | | | | | | | | |
|  |  | pursuant to the attached written offer to settle, dated | | | | | | | | | | | | |  | | | | | | , 20 | | |  | [R. 14.05(2)]. | |
|  |  | according to the following legislation: | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | . |
|  | | (Name of statute or regulation and section) | | | | | | | | | | | | | | | | | | | | | | | |  |
| Les formules des tribunaux sont affichées en anglais et en français sur le site [www.ontariocourtforms.on.ca](http://www.ontariocourtforms.on.ca/). Visitez ce site pour des renseignements sur des formats accessibles. | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **FORM 9B** | | | | | **PAGE 2** | | | | |  |
|  | | | | |  | | | | | Claim No. |
|  | Other: | | (Specify.) | | | | | | | |
|  |  |  | | | | | | | | |
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|  |  |
|  | | | | | | , 20 |  |  |  | |
|  | | | | | |  |  |  | (Signature of party or representative) | |
| **CAUTION:** | | | | To obtain an assessment of damages, all defendants must be noted in default. If one or more defendants has filed a defence, the matter must proceed to a settlement conference. To bring a motion in writing for an assessment of damages, file a Notice of Motion and Supporting Affidavit (Form 15A). You can get forms at court offices or online at [www.ontariocourtforms.on.ca](http://www.ontariocourtforms.on.ca). | | | | | | |