LABOUR RELATIONS ACT, 1995

**APPLICATION FOR CERTIFICATION**

BEFORE THE ONTARIO LABOUR RELATIONS BOARD

**Between:**

**Applicant,**

‑ and ‑

**Responding Party.**

**PLEASE READ INFORMATION BULLETIN NO. 1 – CERTIFICATION OF TRADE UNIONS BEFORE COMPLETING THIS FORM.**

The applicant applies to the Ontario Labour Relations Board for certification of the employees of the responding party in a unit described below.

1. (a) Name, address, telephone number, facsimile number and e-mail address of the applicant:

(b) Name, address, telephone number, facsimile number and e-mail address of a contact person for the applicant (Please Note: this individual **must** be regularly available by phone during the five (5) days leading up to the date set for the vote. Your contact person should be an individual with the authority to enter into agreements on your behalf.):

(c) E-mail address of representative and assistant (if any):

**□ Counsel: Assistant:**

**□ Paralegal: Assistant:**

**□ other: Assistant**:

**[Periods of time referred to in this application, in other Board forms and notices, and in the Board's Rules of Procedure do not include weekends, statutory holidays, or any other day that the Board is closed.]**

(d) Name, address, telephone number, facsimile number and e-mail address of the responding party and contact person:

[Before you file your application with the Board, you must deliver to the responding party: a copy of your application, a blank response form (A-2, including Schedules A and B and the Instructions for filing Excel Schedules with the Board, found at Tab 4 of the Spreadsheet, a blank Confirmation of Posting (A-124) , a Notice to Employer of Application for Certification (Form C-1) with the names of the parties and the date inserted, a copy of Information Bulletin No. 1 -- Certification of Trade Unions, a copy of Information Bulletin No. 3 -- Vote Arrangements, a copy of Information Bulletin No. 4 -- Status Disputes in Certification Applications, and a copy of Part III of the Board’s Rules of Procedure. You must also complete the attached Certificate of Delivery.]

2. Detailed description of the unit of employees of the responding party that the applicant claims to be appropriate for collective bargaining, including the municipality or other geographic area affected:

3. Number and addresses of locations where affected employees work (Please list):

4. The number of employees the applicant believes to be in the proposed unit (Please provide a breakdown by location listed in paragraph 3):

5. General nature of the responding party's business:

6. Does the proposed bargaining unit include guards?

[ ] Yes

[ ] No

7. Name, address, telephone number, facsimile number and e-mail address of any trade union known to the applicant which claims to represent any employee(s) who may be affected by this application:

[Before you file your application with the Board, you should deliver to the union(s) named in paragraph 7: a copy of this application, a blank intervention form, a copy of Information Bulletin No. 1 -- Certification of Trade Unions, a copy of Information Bulletin No, 3 -- Vote Arrangements, a copy of Information Bulletin No. 4 -- Status Disputes in Certification Applications, and a copy of Part III of the Board’s Rules of Procedure. You must also complete the attached Certificate of Delivery.]

8. Membership evidence relating to this application accompanies this application and

[ ] does

[ ] does not

represent membership evidence on behalf of 40 percent or more of the employees in the proposed bargaining unit.

[Section 7(13) of the Act provides that the application for certification shall be accompanied by a list of names of union members in the proposed bargaining unit and evidence of their status as union members, but the trade union shall not give this information to the employer.]

9. Other relevant statements (attach additional pages if necessary):

**Vote Arrangements** (Please read Information Bulletin No. 3 ‑ Vote Arrangements before completing this portion of the form.)

10. Do you assert that a vote should take place on the fifth day after the date on which this application is filed with the Board?

[ ] Yes

[ ] No

If no, please explain fully. As well, please state the date on which you believe the vote should take place, and explain why:

11. Please list your proposed hours for the vote specifying start and finish times and either a.m. or p.m.:

Please explain the reasons for your proposed vote times (e.g., shift change, employee start times etc.):

12. Please indicate the location you propose for the poll(s):

**Poll #1**

Room, or other description of the location:

Floor:

Address:

City:

**Poll #2 (only if multiple locations are necessary):**

Room, or other description of the location:

Floor:

Address:

City:

Please explain the reason for your proposed poll location(s):

13. Please state the name of the Scrutineer you have selected to represent you at each poll:

**Poll #1:**

**Poll #2 (only if multiple locations are necessary):**

14. Please state the name of the Agent you have selected to represent you at the counting of the ballots:

15. Please indicate the name of the applicant as you wish it to appear on the Notice in the voting booth (and, in a displacement application, on the ballot):

**DATED** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature for the Applicant**

**ATTACHMENTS**

THE FOLLOWING DOCUMENTS MUST ACCOMPANY THIS APPLICATION WHEN IT IS FILED WITH THE BOARD:

(A) ANY MEMBERSHIP EVIDENCE RELATING TO THIS APPLICATION;

(B) ONE COPY OF A LIST OF EMPLOYEES, IN ALPHABETICAL ORDER, CORRESPONDING WITH THE MEMBERSHIP EVIDENCE FILED; AND

(C) A COMPLETED DECLARATION VERIFYING MEMBERSHIP EVIDENCE (FORM A‑4)

NOTE: THE MEMBERSHIP EVIDENCE, LIST OF EMPLOYEES CORRESPONDING WITH THE EVIDENCE, AND THE DECLARATION VERIFYING EVIDENCE ARE NOT TO BE DELIVERED TO THE EMPLOYER OR ANY AFFECTED TRADE UNION.

**CERTIFICATE OF DELIVERY**

1. I certify that the following documents were delivered to the employer, as follows:

° a copy of the Application for Certification (Form A‑1);

° a blank copy of a Response to Application for Certification (Form A‑2) including Schedules A & B (List of Employees);

° a blank Confirmation of Posting (A-124);

° a completed copy of the Notice to Employer of Application for Certification (Form C-1), **with the names of the parties and the date inserted**;

° a copy of Information Bulletin No. 1 -- Certification of Trade Unions;

° a copy of Information Bulletin No. 3 -- Vote Arrangements;

° a copy of Information Bulletin No. 4 -- Status Disputes in Certification Applications; and

° a copy of Part III of the Board's Rules of Procedures.

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Name of Organization and name Address or facsimile number to and title of person to whom which documents were

documents were delivered delivered

2. **[Complete this section only if you identified an affected trade union in paragraph 7 of the application.]**

I certify that the following documents were delivered to the trade union(s) named in paragraph 7 of the application, as follows:

° a completed copy of the Application for Certification (Form A‑1);

° a blank copy of an Intervention in Application for Certification (Form A‑3);

° a copy of Information Bulletin No. 1 -- Certification of Trade Unions;

° a copy of Information Bulletin No. 3 -- Vote Arrangements;

° a copy of Information Bulletin No. 4 -- Status Disputes in Certification Applications; and

° a copy of Part III of the Board's Rules of Procedure.

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Name of Organization and name Address or facsimile number to and title of person to whom which documents were

documents were delivered delivered

**[Complete either section 3 or section 4 below.]**

3. The documents were delivered by [   ] facsimile transmission or [   ]

hand delivery on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at\_\_\_\_\_\_\_\_\_\_\_\_\_ a.m./p.m.

(Date)

4. The documents were given to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on

(Name of Courier)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and I was advised that they would be delivered

(Date)

not later than \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at \_\_\_\_\_\_\_\_\_\_\_ a.m. /p.m.

(Date)

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IMPORTANT NOTES**

The Board’s forms, Notices, Information Bulletins, Rules of Procedure and Filing Guide may be obtained from its website [www.olrb.gov.on.ca](http://www.olrb.gov.on.ca/) or by calling 416-326-7500 or toll-free at 1-877-339-3335.

**FRENCH OR ENGLISH**

Vous avez le droit de communiquer et recevoir des services en français et en anglais. La Commission n’offre pas de services d’interprétation dans les langues autres que le français et l’anglais.

You have the right to communicate and receive services in either English or French. The Board does not provide translation services in languages other than English or French.

**CHANGE OF CONTACT INFORMATION**

Notify the Board immediately of any change in your contact information. If you fail to do so, correspondence sent to your last known address (including email) may be deemed to be reasonable notice to you and the case may proceed in your absence.

**ACCESSIBILITY AND ACCOMMODATION**

The Board is committed to providing an inclusive and accessible environment in which all members of the public have equitable access to our services. We will aim to meet our obligations under the *Accessibility for Ontarians with Disabilities Act* in a timely manner. Please advise the Board if you require any accommodation to meet your individual needs. The Board’s Accessibility Policy can be found on its website.

**COLLECTION AND DISCLOSURE OF INFORMATION AND DOCUMENTS**

Any relevant information that you provide to the Board must in the normal course be provided to the other parties to the proceeding. Personal information collected on this form and in written or oral submissions may be used and disclosed for the proper administration of the Board’s governing legislation and case processing. In addition, the *Tribunal Adjudicative Records Act, 2019* requires that the Board make adjudicative records (which include applications filed and a listing of such applications) available to the public. The Board has the power to make part or all of an adjudicative record confidential. The *Freedom of Information and Protection of Privacy Act* may also address the treatment of personal information. More information is available on the Board’s website [www.olrb.gov.on.ca](http://www.olrb.gov.on.ca/). If you have any questions concerning the collection of information or disclosure of adjudicative records, contact the Solicitors’ Office at the number listed above or in writing to the OLRB, 505 University Ave., 2nd floor, Toronto, ON M5G 2P1.

**E-FILING AND E-MAIL**

The Rules of Procedure and Filing Guide set out the permitted methods of filing. **In the event of emergencies or other circumstances, the Board may post a Notice to Community on its website, which will prevail over the Rules of Procedure and Filing Guide. You should check the Board’s website prior to filing.** Note that the efiling system is not encrypted. Contact the Client Services Coordinator at the numbers listed above if you have questions regarding e-filing or other filing methods. If you provide an e-mail address with your contact information, the Board will in most cases communicate with you by e-mail from an out-going only generic account. Incoming emails are not permitted.

**HEARINGS AND DECISIONS**

Hearings are open to the public unless the Board decides that matters involving public security may be disclosed or if it believes that disclosure of financial or personal matters would be damaging to any of the parties. Hearings are not recorded and no transcripts are produced.

The Board issues written decisions, which may include the name and personal information about persons appearing before it. Decisions are available to the public from a variety of sources including the Ontario Workplace Tribunals Library and [www.canlii.org](file:///\\ETCPTOVSPIFS004.CIHS.AD.GOV.ON.CA\MOL\Agencies%20Boards%20Commissions\Ontario%20Labour%20Relations%20Board\MOCHA\Templates%20-%20Document%20Generator\Common\www.canlii.org). Some summaries and decisions may be found on the Board’s website.