# **CONSENT**

l,	, of		acknowledge
(Name)		(Name of Law Firm)	_
and consent to the	Assessment of my a	ttached account dated	in
the amount of		, by the Local Reg	gistrar of the
Court of King's Be	nch, Judicial Centre	of	, pursuant to
s. 67 of <i>The Legal</i>	Profession Act, 1990		
DATED at the	of	, in the Pro	ovince of
	(City or Town)	(name of City/Town)	
Saskatc	hewan, this da	y of,	20
		Signature of Solicit	tor

COURT FILE NUMBE	R	
COURT OF KING'S B	ENCH FOR SASKATCHEWAN	
JUDICIAL CENTRE		
APPLICANT(S)		
	(your name)	
RESPONDENT(S)		
	(name of lawyer)	
IN T	HE MATTER OF	
	(name of lawyer)	
BARRISTER	& SOLICITOR OF, (name of City/Town)	SASKATCHEWAN
AND IN THE	MATTER OF A BILL FOR PROFESSI	
DENDE	DED BY THE CAID	4-
KENDE	RED BY THE SAID (name of law	
		,
	(your name)	
DECLIEST T		EMENT OF ACCOUNTS
<u>KEQUEST I</u>	TO LOCAL REGISTRAR FOR ASSESS	SMENT OF ACCOUNTS
The undersigned he	ereby request that the bill and demand	delivered to the Applicant
_	nt dated, copies o	
	e Local Registrar of the Court of King	
_	his deputy, pursuant to s. 67 of <i>Th</i>	
		_
_	gned further request that the costs in	
and the amount du	le to or from each party with resp	ect to the bill and the
costs of assessme	ent be certified by the Local Registr	ar pursuant to s. 69 of
The Legal Professi	on Act, 1990.	
DATED at	, Saskatchewan, this day City or Town)	of, 20
(name of	City or Town)	

	(your sign	ature)
DATED at (name of City	, Saskatchewan, this day of or Town)	, 20
	(Lawyer/Law Firm F	Representative)

COURT FILE NUMBER	₹	
COURT OF KING'S BE	ENCH FOR SASKATCHEWAN	
JUDICIAL CENTRE _		-
APPLICANT(S)		_
	(your name)	
RESPONDENT(S) _	(name of lawyer)	_
	(name of lawyer)	
IN TH	HE MATTER OF	
	(name of lawyer)	
BARRISTER	SOLICITOR OF (name of City/Town	, SASKATCHEWAN
AND IN THE I	MATTER OF A BILL FOR PROFESS	SÍONAL SERVICES
RENDEF	RED BY THE SAID	to
	RED BY THE SAID(name of la	awyer)
	(your name)	
	(your name)	
	NOTICE OF APPLICATION	
NOTICE TO RESPO	NDENT(S)	
• •	ade against you. You are a responders matter before the Court.	nt. You have the right to
To do so, you must b	pe in Court when the application is he	ard as shown below:
Where		
Date		
Time		
(Read the Notice at to you must do it.)	the end of this document to see what	else you can do and when
Remedy claimed or	sought:	

- Pursuant to Section 67 of The Legal Profession Act, 1990, the bill and demand delivered to the Applicant by the Respondent be referred for assessment by a proper officer of the Court;
- 2. Any action by the Respondent on the said bill and demand be restrained pending the completion of such assessment; and
- The assessment officer assess the costs in this matter and certify what they find to be due to or from either party in respect of the bill and the costs of the reference.

### Grounds for making this application:

4.

### Material or evidence to be relied on:

5.	the Affidavit of _	
		(your name)

- 6. Draft Order; and
- 7. such other material as this Honorable Court may allow.

## Applicable Act:

- 8. From The Legal Profession Act, 1990:
  - 67(1) A bill of fees or disbursements with respect to services performed by a member may be assessed:
    - (a) on application to the court:
    - (i) by the person charged with the bill, within 30 days after the day on which the person received the bill;
    - (ii) by the member, if no application is made pursuant to subclause (i); or
    - (iii) by the person charged with the bill, after the expiration of the time set out in subclause (i), if the court is satisfied that it is in the interests of justice to do so; or
    - (b) on application to the local registrar described in subsection (2), at the request of both the member and the person charged with the bill, at any time.

- (2) An application pursuant to clause (1)(a) shall be referred by the court to the local registrar of the court at the judicial centre nearest to which the member who performed the services carries on the member's practice.
- (3) The court may restrain the bringing of an action with respect to that bill pending a reference pursuant to subsection (2).
- (4) On an assessment of a bill pursuant to this Act, the local registrar may order any further particulars or details of the services for which the bill was ordered.

DATED at	, Saskatchewan, this _	day of	, 20
(name of City	or Town)	-	
		(your signature)	

### NOTICE

If you do not come to Court either in person or by your lawyer, the Court may give the applicant(s) what they want in your absence. You will be bound by any order that the Court makes. If you want to take part in this application, you or your lawyer must attend in Court on the date and at the time shown at the beginning of the form. If you intend to rely on an affidavit or other evidence when the application is heard or considered, you must reply by giving reasonable notice of the material to the applicant.

### CONTACT INFORMATION AND ADDRESS FOR SERVICE

Name:	
Address:	
Telephone #:	
Whose address for service is:	

COURT FILE NUMBER	₹	_
COURT OF KING'S BE	NCH FOR SASKATCHEWAN	
JUDICIAL CENTRE		
APPLICANT(S) _		
- (-/	(your name)	
RESPONDENT(S) _		
RESPONDENT(S) _	(name of lawyer)	_
	,	
IN TH	IE MATTER OF	
	(name of lawyer	
BARRISTER &		_, SASKATCHEWAN
AND IN THE I	name of City/Tow) MATTER OF A BILL FOR PROFES	
RENDER	RED BY THE SAID	to
	(name of	lawyer)
	(your name)	-
	,	
	A FEID AVIT OF	
	AFFIDAVIT OF(your name	<u></u>
	(your name	0)
,(your na	MAKE OATH AND	SAY:
(your ria	arrie)	
1. THAT I am the	Applicant herein and as such have	personal knowledge of the
facts herein de	eposed to except where stated to be	on information and belief.
2. On or about	I engaged	, barrister
	I engaged(date) (r	
and solicitor to	act as counsel on my behalf and pr	rovide me with professional
services and a	dvice respecting a matter of	law.
3. On or about	a bill was delivered to	me by
	(date)	(name of lawyer)

in the amount of	_, which bill is attached hereto and marked as
Exhibit A to this my affidavit.	
4. I dispute the amount of the said	bill.
• •	f an application for an order referring the said Section 67 of <i>The Legal Profession Act, 1990.</i>
SWORN BEFORE ME at the, in the Province of Saskatc this, day of, 20	hewan )
A COMMISSIONER FOR OATHS in ar for the Province of Saskatchewan. My Commission Expires: -OR- Being a Solicitor	

COURT FILE NUMBER COURT OF KING'S BE JUDICIAL CENTRE _ APPLICANT(S) _ RESPONDENT(S) _	NCH FOR SASKAT					
BARRISTER 8	IE MATTER OF SOLICITOR OF _ ( MATTER OF A BIL RED BY THE SAID	name of	City/Town	, SASKATO () BIONAL SE	RVICES	
		our name		,		
BEFORE THE HONO	DURABLE	) )		1BERS ON , THE _ , 20_		
	DRAF	T ORD	<u>ER</u>			
UPON THE APPLICATION THE APPLI	ATION of the Applic	cant and	I having re	ad the mate	erials filed	
IT IS HEREBY ORDI	ERED that:					
demand there Bench at the	67 of <i>The Legal</i> on be assessed bulled Judicial Centre of _e fixed by him;	y the L	ocal Regis	strar of the	Court of King	's

- No action shall be brought on the bill or the demand thereon until the bill has been assessed and the amount thereon has been certified due by the assessment officer; and
- 3. The assessment officer shall assess the costs in this matter and certify what he finds to be due to or from either party in respect of the bill and the costs of the reference.

ISSUED at the City of Re	egina, in the Province	of Saskatchewan,	this day o
, 20			
		LOCAL REGISTR	 AR

CANADA	)
PROVINCE OF SASKATCHEWAN	)
TO WIT:	)
IN THE MATTER OF _	
	(name of lawyer), SASKATCHEWAN (name of City/Town)
	LL FOR PROFESSIONAL SERVICES
RENDERED BY THE SAII	(name of lawyer)
(y	vour name)
ACKNOWLEDG	SEMENT OF SERVICE
regular mail to:	form without delay and to return it by fax or
delay, you may not receive notice of ar	mpleted Acknowledgement of Service without ny further proceedings or any documents may vill be required to pay the costs of service.
I ACKNOWLEDGE SERVICE on me of	a copy of the following document(s):
<ol> <li>Notice of Application;</li> <li>Affidavit of</li> <li>Draft Order.</li> </ol>	; and

Signature	Date of Service	
My name is:		
My address for service is	S:	
My telephone number is		
My fax number is:		
My e-mail address is: (o <sub>l</sub>	otional)	
	<u>NOTICE</u>	
	N ADDRESS IN SASKATCHEWAN WHERE DOCU R YOU IF YOU WISH TO RECEIVE NOTICE O TTER.	
	e your fax number and e-mail address. If you include you be served on you by fax or electronic transmission.	
	or e-mail address that you give on this form will be used in the other parties and file with the court written notice	
Name of party:		_
Address for service:	(your name)	
Telephone number:	(your address for service)	
reiephone number.	(your telephone number)	_