

FORM 20  
LABOUR RELATIONS BOARD (PRINCE EDWARD ISLAND)  
REPLY TO NOTICE OF APPLICATION FOR REVOCATION OF ACCREDITATION ORDER

BETWEEN:

AND:

APPLICANT

RESPONDENT

To:

This form serves as a reply to employers or employers' organizations named in the application and to any other person including any trade union or council of trade unions that the Board believes has an interest that should be considered by the Board in connection with this application for revocation of accreditation. Part A shall be completed by the employers. If any person, trade union or council of trade unions that has received notice of the application for revocation of accreditation from the Board believes that it has an interest that should be considered by the Board, it shall complete Part B.

PART A

1. A list arranged as in the attached Exhibit "A" of all employers in the unit of employers described in the application as at \_\_\_\_\_, the date that the Applicant's application was made.

2. For each employer listed in the attached Schedule, the address and, if known, telephone number: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Name of trade union or council of trade unions affected by the application: \_\_\_\_\_  
\_\_\_\_\_

4. Address of trade union or council of trade unions: : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Detailed description including geographic area and sector of the construction industry of the unit of employers for which the Respondent is the accredited bargaining agent. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. The date of accreditation of the Respondent as bargaining agent of the employers in the unit: \_\_\_\_\_  
\_\_\_\_\_

7. The Respondent is or was a party to a collective agreement, a copy of which is enclosed herewith, with: \_\_\_\_\_  
(name of trade union or council of trade unions)

that

(a) was signed on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_;  
(b) became effective on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_;  
(c) contains the following provision relating to its termination \_\_\_\_\_

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

8. State grounds for opposition to application \_\_\_\_\_

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

9. Schedule A forms part of this Reply.

PART B

1. Name of person, trade union or council of trade unions \_\_\_\_\_

\_\_\_\_\_

2. Address of person, trade union or council of trade unions \_\_\_\_\_

\_\_\_\_\_

3. State grounds for opposition to application \_\_\_\_\_

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

I hereby declare that the statements made and information given herein are true in substance and in fact and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and by virtue of the *Evidence Act* R.S.P.E.I. 1988 Cap. E-11.

DECLARED by the \_\_\_\_\_ )  
before me at \_\_\_\_\_ )  
in the County of \_\_\_\_\_ )  
Province of \_\_\_\_\_ )  
this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_. )

\_\_\_\_\_  
A Commissioner for taking affidavits in the  
Supreme Court

\_\_\_\_\_  
Respondent

\_\_\_\_\_  
Title

*Personal information on this form is collected under section 31(c) of Prince Edward Island's Freedom of Information & Protection of Privacy (FOIPP) Act as it relates directly to and is necessary for administering services under Prince Edward Island's Labour Act. If you have any questions about this collection of personal information, you may contact the Chief Executive Officer of the Labour Relations Board at 902-368-5550.*