



A party may file a Request for Reconsideration by completing this Form 20 within **thirty (30)** days from the date of a final decision. Please see the Tribunal's **Practice Direction on Reconsideration** for important information on Requests for Reconsideration.

**Follow these steps to make your request:**

1. Fill out this Form 20.
2. Deliver a copy of Form 20 to all parties.
3. Complete a Statement of Delivery (Form 23).
4. File Form 20 and Form 23 with the Tribunal.

A Request for Reconsideration made more than 30 days following the Decision will not be granted unless the Tribunal determines that the delay was incurred in good faith and no substantial prejudice will result to any person affected by the delay.

**Information for all parties who receive this Request for Reconsideration:**

A Request for Reconsideration of a decision of the Human Rights Tribunal of Ontario has been initiated. You are not required to file a Response to this Request at this time. The Tribunal will review this Request and may direct you to file a Response.

If the Tribunal directs you to file a response, you must complete a Response to Request for Reconsideration (Form 21) and deliver it and file it as directed by the Tribunal.

Download forms from the Tribunal's web site  
accessible format, contact us:

If you need a paper copy or

Human Rights Tribunal of Ontario  
15 Grosvenor Street, Ground Floor  
Toronto, ON M7A 2G6  
M7A 2A3

Phone: 416-326-1312 Toll-free: 1-866-598-0322  
TTY: 416-326-2027 Toll-free: 1-866-607-1240  
Email:



Application Information	
Tribunal File Number:	
Name of Applicant:	
Name of Each Respondent:	

**1. Your contact information (person or organization making this Request)**

First (or Given) Name		Last (or Family) Name		Organization (if applicable)	
Street Number	Street Name			Apt/Suite	
City/Town		Province	Postal Code	Email	
Daytime Phone	Cell Phone		Fax	TTY	

If you are filing this as the Representative (e.g. lawyer) of one of the parties please indicate:

Name of party you act for and are filing this on behalf of:	LSUC No. (if applicable)
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What is the best way to send information to you?  Mail  Email  Fax  
(If you check email, you are consenting to the delivery of documents by email.)

Check off whether you are (or are filing on behalf of) the:

- Applicant       Respondent       Ontario Human Rights Commission  
 Other - describe: \_\_\_\_\_

**2. Please check the reasons why you are making this Request for Reconsideration. Check all that apply.**

- There are new facts or evidence that could potentially be determinative of the case and that could not reasonably have been obtained earlier.
- You were entitled to notice but, through no fault of your own, did not receive notice of the proceeding or a hearing.
- The decision is in conflict with established case law or Tribunal procedure and the proposed reconsideration involves a matter of general or public importance.
- Other factors exist that outweigh the public interest in the finality of Tribunal decisions.

**3. Please provide detailed reasons and representations in support your Request.**

**4. If your Request for Reconsideration is granted, what remedy or relief are you seeking?**

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**5. If your Request for Reconsideration is being filed more than 30 days after the date of the Decision, explain in detail the reason for the delay and why the Request should be accepted late.**

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**6. Signature**

By signing my name, I declare that, to the best of my knowledge, the information that is found in this form is complete and accurate.

Name:	
Signature:	Date: (dd/mm/yyyy)

Please check this box if you are filing your request electronically. This represents your signature. You must fill in the date, above.

Collection of Information:

Under the Ontario *Human Rights Code*, the Human Rights Tribunal of Ontario (HRTO) has the right to collect the personal information requested on this form. We use the information to resolve your application. After you file the form, your information may also be available to the public. If you have questions about how the HRTO uses your personal information, contact the HRTO at 416-326-1312 or 1-866-598-0322 (toll-free.)