



ABOUT NOTICES OF AFFILIATION

Part IV of By-Law 7 allows lawyers and licensed paralegals to join with an affiliated entity in the delivery or promotion and delivery of the services of the licensee and the services of the affiliated entity.

APPLICATION CHECKLIST – Please submit the following:

1. Complete and original application form – DO NOT FAX OR EMAIL

The Law Society of Ontario may investigate or verify any information supplied in this application, and may require further information from you before the application is approved. **Omissions or inaccuracies in responses may delay processing.**

If the space provided for any answer is insufficient, attach a separate sheet that is signed and dated by the applicant and staple it to the application.

2. Copy of Agreement or other document

Submit a copy of any agreement or other document that addresses the matters mentioned in subsection 33(3) of By-Law 7.

QUESTIONS?

Please direct questions about review and approval of this application to:

Complaints & Compliance
Phone: 416-947-3315 (ask to be transferred)
Email: lsforms@lso.ca

MAILING ADDRESS

Mail original applications and supporting documents to:

Law Society of Ontario, Complaints & Compliance
Osgoode Hall, 130 Queen St W, Toronto, Ontario M5H 2N6

DO NOT FAX OR EMAIL



PART A – APPLICANT'S INFORMATION

1. PERSONAL INFORMATION

Applicant's Full Name:

Law Society Number:

2. BUSINESS CONTACT INFORMATION

Business/Employer Name and Address (street, city, province, postal code):

Phone:

Mobile:

Fax:

Email:

NOTE: By-Law 8 requires licensees to notify the Law Society immediately after any change to their contact information.

3. ALTERNATE CONTACT INFORMATION (If applicable)

If there are multiple licensees involved in the affiliation, provide us with an alternate contact person:

Lawyer/Paralegal's Full Name:

Law Society Number:

Business/Employer Name and Address (street, city, province, postal code):

Phone:

Mobile:

Fax:

Email:

PART B – INFORMATION ABOUT THE AFFILIATION

4. AFFILIATED ENTITY INFORMATION

Business Name:

Business Address (street, city, province, postal code):

Business Phone:

Business Website:

Occupation/Type of Business:

5. AFFILIATION ARRANGEMENTS

Attach copies of any written agreements or other documents that evidence the arrangement(s) between the licensee(s) and the affiliated entity with respect to 5a) – 5d).

a) Provide a detailed description of the financial arrangements that exist between the licensee and the affiliated entity:

b) Provide a detailed description of the arrangements that exist between the licensee and the affiliated entity with respect to the ownership, control and management of the professional business through which the licensee practises law or provides legal services:

c) Provide a detailed description of the arrangements that exist between the licensee and the affiliated entity with respect to compliance with the Law Society's rules, policies and guidelines on conflicts of interest in relation to clients of the licensee who are also clients of the affiliated entity:

d) Provide a detailed description of the arrangements that exist between the licensee and the affiliated entity with respect to compliance with the Law Society's rules, policies and guidelines on confidentiality of information in relation to information provided to the licensee or any licensee of the group by clients who are also clients of the affiliated entity:

PART C – CONFIRMATION

I will provide any additional information requested with respect to this Notice of Affiliation.

I confirm that I have read Part IV of By-Law 7 and have made the necessary arrangements that will enable me to comply with sections 32 and 33 of By-Law 7.

I understand that I have a continuing obligation to immediately provide written notification of any change to the information that I have provided to the Law Society of Ontario in connection with this Notice of Affiliation, including but not limited to any changes to the affiliation as detailed in subsection 35(1) of By-Law 7.

I understand that I must file an Affiliation Report each year and that failure to do so may result in the suspension of my licence pursuant to subsection 47(1) of the *Law Society Act*.

I confirm that all information supplied by me with respect to this Notice of Affiliation, and in the documents provided, is true, accurate, and complete.

Date: _____

Signature of Applicant: _____

Print Name of Applicant: _____