



**LAW SOCIETY OF ONTARIO
APPLICATION FOR EXEMPTION FROM THE
REQUIREMENT TO PAY THE ANNUAL FEE AND TO
SUBMIT THE PARALEGAL ANNUAL REPORT
(under By-law 5 & 8)**

Instructions to the Applicant:

Complete all sections. The Law Society may investigate or verify any information supplied on this application, and may require further explanation from you before your application is approved. **Any Omissions or inaccuracies in your answers will delay processing.** If the space provided for any answer is insufficient, complete your answer on a separate sheet, sign and date the sheet and staple it to this application form.

The Law Society may not be able to approve your application if you are:

- a) suspended; or
- b) the subject of a complaint, audit, investigation, search or seizure by the Law Society; or
- c) a party to a proceeding under Part II of the *Law Society Act*.

Application Requirements:

- submit your original and completed application – **DO NOT FAX**
- pay all fees that have accrued, including the current year
- submit all Paralegal Annual Report(s), including the current year

- provide evidence from your bank that all open trust/mixed trust accounts have been closed and have a zero balance – **applies to: (Sole Practitioners providing legal services in Ontario during the last 3 years) – Part C**
- OR**
- provide proof that you no longer have signing authority over any trust/mixed trust accounts; provide a letter from the signing partner or your bank – **applies to: (Partners, Employees and Associates providing legal services in Ontario during the last 3 years) – Part B**

- provide all information regarding location of files – Part E
- provide an explanation on “Specifics” page, where required – Part G
- provide a letter from a qualified medical practitioner indicating that you are incapacitated and are unable to provide legal services in Ontario, if applicable (*see section 37(1) of the Law Society Act*)

| Mail your completed application to: | For inquires contact: |
|--|---|
| By-Law Administration Services Law Society of Ontario Osgoode Hall 130 Queen St W Toronto ON M5H 2N6 | By-Law Administration Services General Line: (416) 947-3315 Toll Free: 1-800-668-7380 Email: bylawadmin@lso.ca |



Law Society
of Ontario

Barreau
de l'Ontario

**LAW SOCIETY OF ONTARIO
APPLICATION FOR EXEMPTION FROM THE
REQUIREMENT TO PAY THE ANNUAL FEE AND TO
SUBMIT THE PARALEGAL ANNUAL REPORT
(under By-law 5 & 8)**

Instructions: All sections must be completed. Provide additional information on a separate sheet if required. Incomplete applications will delay processing. Please refer to the cover page for complete instructions.

PART A – APPLICANT INFORMATION

| PERSONAL INFORMATION | | |
|--|----------------------|-----------|
| _____ | _____ | _____ |
| First Name | Middle Name | Last Name |
| Law Society Number: _____ | Date of Birth: _____ | |
| | Day / Month / Year | |
| The date you stopped providing legal services: _____ | | |
| Day / Month / Year | | |

| Reason for Exemption (choose ONE) |
|---|
| <input type="checkbox"/> I am over sixty-five years of age. |
| <input type="checkbox"/> I am incapacitated and as a result, I am unable to provide legal services. <i>NOTE: Provide a letter from a qualified medical practitioner indicating that you are incapacitated within the meaning of the Law Society Act and are unable to provide legal services (see section 37(1) of the Law Society Act).</i> |

| BUSINESS CONTACT INFORMATION | HOME CONTACT INFORMATION |
|--|--|
| Business/Employer Name and Address: _____ _____ _____ | Home Address: _____ _____ _____ |
| Telephone: _____ | Telephone: _____ |
| Mobile: _____ | Mobile: _____ |
| Fax: _____ | Fax: _____ |
| Email: _____ | Email: _____ |

Note: By-Law 8 requires licensees to notify the Law Society immediately after any change in the above contact information.

PART B

| | | |
|--|--|--|
| Answer ALL of the following questions. If you answer yes to any question provide an explanation in Part G. | | |
| a) | I am the subject of an audit, investigation and/or search or seizure by the Law Society. | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| b) | I am party to a proceeding under Part II or section 33 of the <i>Law Society Act</i> . | <input type="checkbox"/> YES <input type="checkbox"/> NO |

PART C

| | |
|---|--|
| Choose ONE response that is most appropriate with respect to your work as an Ontario paralegal | |
| <input type="checkbox"/> | <p>I provided legal services in Ontario as a Sole Practitioner within the last three years:</p> <p><input type="checkbox"/> I have accounted for and/or distributed all money and property held in trust (for which I was responsible), to the person(s) entitled to it or to another licensed paralegal entitled to provide legal services in Ontario or to a lawyer entitled to provide legal services in Ontario.</p> <p><i>NOTE: Provide written confirmation from your bank that all open trust/mixed trust accounts have been closed</i></p> <p style="text-align: center;">-or-</p> <p><input type="checkbox"/> I have not accounted for and/or distributed all money and property held in trust for which I was responsible. Provide an explanation in Part G</p> <p style="text-align: center;">-or-</p> <p><input type="checkbox"/> I have not been responsible for any money or property held in trust.</p> |
| <input type="checkbox"/> | <p>I provided legal services in Ontario as a Partner/Associate/Employee within the last three years.</p> <p><i>NOTE: Provide a letter from the firm’s managing partner confirming that you no longer have signing authority over any trust/mixed trust accounts</i></p> |
| <input type="checkbox"/> | <p>I have never provided legal services in Ontario to the public as a licensed paralegal, or I have not within the last three years.</p> |

PART D - CLIENT FILES, DOCUMENTS AND PROPERTY

| | |
|---|---|
| Choose ONE response that is most appropriate with respect to your work as an Ontario paralegal | |
| <input type="checkbox"/> | I have disposed of client files or arrangements have been made to the satisfaction of my clients to have their files, documents and/or property returned to them. |
| <input type="checkbox"/> | I have transferred all client files, documents and/or property with the client’s authorization to another licensed paralegal entitled to provide legal services in Ontario or lawyer entitled to practise law. Provide details in Part E |
| <input type="checkbox"/> | I have not disposed of client files or made arrangements to have all client files, documents and/or property returned to them to their satisfaction. Provide an explanation in Part G |
| <input type="checkbox"/> | I have not been responsible for any client matters, files, documents and/or property. |

PART E – CLIENT PROPERTY AND ELECTRONIC FILE INFORMATION

I have transferred and disposed of my electronic and/or hard copy client files, documents and property as follows:

| | Transferred to and/or location stored (Name, Address) | Contact Information (Name, Telephone Number) |
|--------------|--|---|
| Active Files | | |
| Closed Files | | |

PART F – BY-LAW COMPLIANCE

| Answer ALL of the following questions | | |
|--|---|--|
| a) | I confirm that I have completed and filed the Paralegal Annual Report to the last filing due date required of me. | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| b) | I have complied with my Continuing Professional Development (CPD) obligations. | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| c) | I confirm that my paralegal business and any trust account(s) I have operated have been wound up, or that I no longer have signing authority over any of my firm’s trust/mixed trust accounts. | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| d) | I confirm that I have completed all forms required to be completed by the Law Foundation of Ontario with respect to the closure of my trust account(s), if applicable. | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| e) | <p>Are you now or have you within the last 12 months been a shareholder, director or officer of a professional corporation or provided legal services through a professional corporation?</p> <p>If “Yes”, provide the name of the professional corporation:</p> <p>_____</p> | <input type="checkbox"/> YES <input type="checkbox"/> NO |

PART G – SPECIFICS

I undertake not to provide legal services in Ontario from the effective date of this application.

Should I wish to provide legal services in Ontario, I undertake to immediately notify the Law Society of my intention. I will provide the Law Society with all required information to change my status. I understand that my obligation to pay the annual fee and submit the Paralegal Annual Report will resume.

I declare that all information supplied by me with respect to this application, and in the documents provided in connection with this application, is true, complete, and accurate.

Signature of Applicant

Date

Signature of Witness

Name of Witness

Mail to:

By-Law Administration Services
Law Society of Ontario
Osgoode Hall
130 Queen Street West
Toronto ON M5H 2N6

DO NOT FAX