



ONTARIO LABOUR RELATIONS BOARD

APPLICATION FOR ACCREDITATION, CONSTRUCTION INDUSTRY *Labour Relations Act, 1995*

Form A-92

Fields marked with an asterisk (*) are mandatory.

Between: *

SOUTHWEST RESIDENTIAL CONSTRUCTION LABOUR BUREAU

Applicant

- and -

LABOURERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 837

Responding Party

- Review Information Bulletin No. 33 – “Accreditation in the Construction Industry under s.136 of the *Labour Relations Act, 1995* (Non-ICI)”, the Filing Guide and the Board’s Rules of Procedure on acceptable methods of delivery and filing **before** completing this form to avoid any delay in processing.
- All forms, Notices, Information Bulletins, the Filing Guide and the Rules of Procedure may be obtained from the Board’s website (<http://www.olrb.gov.on.ca>).
- To print a paper copy of this form, use **only** the “Print” buttons located within the form.
- Save a copy of your completed form and any attachments as the Board will not return them to you. To save the form at any time, use the “Save” buttons located within the form.
- If there is insufficient space on the form, attach additional pages clearly identifying the relevant section of the form. For e-filing, you may attach files by selecting the “Attach documents electronically” option.

Part A Contact Information

Instructions

- Provide the contact information for each Applicant, Responding Party and Intervenor below. If you wish to add additional parties, use the “Add” button or attach a separate page if completing the form by hand.
- For an organization, provide the name and contact information of an individual who will be able to respond on behalf of that organization. When adding multiple individuals at the same organization, “Add” an additional contact section, repeat the organization name and provide that individual’s contact information (e.g. name, email address, phone number).

1 (a). Applicant**Applicant 1**Type * Organization Individual

Organization Name *

Southwest Residential Construction Labour Bureau

First Name Andrew	Last Name Pariser	Position/Title Executive Director
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Full Address (Number, Street, Unit/Apartment, Building Name) 25 North Rivermede Road	Other Address Details (e.g. PO Box, R.R. #, c/o) Unit 13
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City/Town Vaughan	Province/State Ontario	Country Canada	Postal/Zip Code L4K 5V4
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Telephone Number 905-760-7777	Ext.	Fax Number 905-760-7718	Email Address pariser@rescon.com
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Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

1 (b). Representative/Contact Person for the Applicant**Contact 1**Contact Person for * All Parties above Party No.(s) _____Indicate if this person is a Lawyer Paralegal

Organization Name

Filion Wakely Thorup Angeletti LLP

First Name Carl	Last Name * Peterson	Position/Title Counsel
--------------------	-------------------------	---------------------------

Full Address (Number, Street, Unit/Apartment, Building Name) 1 King Street West	Other Address Details (e.g. PO Box, R.R. #, c/o) Suite 1201
--	--

City/Town Hamilton	Province/State ON	Country Canada	Postal/Zip Code L8P 4W9
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Telephone Number 905 972-6870	Ext.	Fax Number 905 577-0805	Email Address cpeterson@filion.on.ca
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Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

Counsel: Danny Parker - dparker@filion.on.ca

Assistant: Gina Radin - gradin@filion.on.ca

2 (a). Responding Party**Responding Party 1**Type * Organization Individual

Organization Name *

Labourers' International Union of North America, Local 837

First Name Riccardo	Last Name Persi	Position/Title Business Manager
------------------------	--------------------	------------------------------------

Full Address (Number, Street, Unit/Apartment, Building Name) 44 Hughson Street South	Other Address Details (e.g. PO Box, R.R. #, c/o)
---	--

City/Town Hamilton	Province/State ON	Country Canada	Postal/Zip Code L8N 2A7
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Telephone Number 905 529-1116	Ext.	Fax Number 905 529-2723	Email Address rpersi@liuna837.ca
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Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

2 (b). Representative/Contact Person for the Responding Party, if known

Contact 1

Contact Person for * All Parties above Party No.(s) _____

Indicate if this person is a Lawyer Paralegal

Organization Name

Goldblatt Partners LLP

First Name Lorne	Last Name * Richmond	Position/Title Counsel
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Full Address (Number, Street, Unit/Apartment, Building Name)

20 Dundas Street West

Other Address Details (e.g. PO Box, R.R. #, c/o)

Suite 1039

City/Town Toronto	Province/State ON	Country Canada	Postal/Zip Code M5G 2C2
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Telephone Number 416 979-6407	Ext.	Fax Number 416 591-7333	Email Address lrichmond@goldblattpartners.com
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Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

Counsel: Ben Katz - bkatz@goldblattpartners.com

3 (a). Affected Party

Contact information for any person, trade union, employer or employer's organization which may be affected by the application must be completed below.

3 (b). Representative/Contact Person for the Affected Party, if known

3 (c). The person, trade union, employer or employers' organization named above is affected by the application for the following reason(s):

Part B Material Facts and Relief Sought

4. In support of its status as an employers' organization, the Applicant files the following documents with this application: (check all that apply)

Charter

Constitution

Bylaws

Other: _____

5. The Responding Party Trade Union or Council of Trade Unions has been certified or has been granted voluntary recognition or has entered into a collective agreement with two or more employers in the unit of employers proposed by the Applicant. List at least two such employers and include the dates of the documents relied on:

1. LIV Communities
2. Heathwood Homes Ltd.
3. Averton Residential

Each of the above companies is signatory with the Responding Party Trade Union to a Collective Agreement executed between the Responding Party Trade Union and the Southwest Residential Construction Labour Bureau, effective from January 1, 2023 to December 31, 2025.

6. Provide a detailed description of the unit of employers that the Applicant claims to be appropriate for accreditation:

Reference **must** be made to the sector(s) of the construction industry and the geographic area(s) or parts thereof claimed. If you require more space, attach a separate document.

See Appendix "A" attached hereto.

7. Provide representations as to the appropriateness of the unit described above, including the history of collective bargaining, if any, of the Applicant and the Responding Party:

If you require more space, attach a separate document.

The Southwest Residential Construction Labour Bureau was formed in December, 2022 to bargain with the Labourers International Union of North America, Local 837 on behalf of locally based contractors who build homes in Board Areas 4, 5, 6, 26. The Southwest Residential Construction Labour Bureau was formed, as builders on these Board areas sought assistance in engaging in collective bargaining with local 837, and as a pattern agreement (with slight variations) was developed. The aim of the Southwest Residential Construction Labour Bureau is to create a level playing field amongst builders in these board areas by creating an accredited collective agreement, and to discuss bargaining and share labour relations information and resources. This application arises as a result of that aim. In addition to collective bargaining efforts, the SRCLB has focused on other issues that stem from the collective agreement including but not limited to labour supply, immigration, training and apprenticeship and health and safety.

The Applicant believes it is the appropriate time to seek accreditation and create the mandatory common collective agreement in Board Areas 4, 5, 6 and 26, for Board Area 4, 5, 6 and 26 contractors, as envisioned in the accreditation provisions of the Act.

8. State the approximate number of employers in the unit described in question 6:

8

9. List the employers in the unit described in question 6:

If you require more space, attach a separate document.

[See Appendix "B" attached hereto.](#)

10. State the approximate number of employees of employers in the unit described in question 6 on the payroll of each such employer for the weekly payroll period immediately preceding the date of this application:

166

11. State the nature of the authority relied upon by the Applicant to act as bargaining agent for employers in the unit of employers:

For example, authority to act as bargaining agent may, in the case of memberships in the Applicant, stem from the Applicant's constitution or by laws; or in the case of members or non-members, from a specific authorization by an employer.

[The By-Laws of the Southwest Residential Construction Labour Bureau and the Authorization Forms signed by its members authorize the Applicant to act as the bargaining agent for employers in the unit and to apply for accreditation in that capacity.](#)

12. Other relevant statements:

[Enclosed are the Applicant's By-Laws, and the Collective Agreement between the Respondent Union and the Southwest Residential Construction Labour Bureau.](#)

13. Attached documents:

Provide a list of the documents you are filing together with this form as instructed below.

Name your documents/attachments so that they are easily identifiable.

If you are e-filing this form, select the "Attach documents electronically" option below and attach each document using the "Add File" button.

If you are filing in a manner other than e-filing, provide the numbered list of documents in the box below.

Note: If your attachments exceed 7MB, you may not e-file. File a paper copy of this form with all attachments using an alternative method permitted by the Board's Rules of Procedure.

No.	File	Description	Size (MB)
		Total Size	0
		Total space left over	7
		Number of attachments	0

DECLARATION

I, Carl Peterson, the Counsel of the Applicant
(name) (office)

herein, declare that:

1. I have knowledge of the affairs of the Applicant;
2. The Applicant is an employers' organization that represents employers who operate businesses in the construction industry.

Date (yyyy/mm/dd): 2024/05/24

If you are not submitting this form electronically, sign below.

Signature

If you are submitting this form electronically, check this box in the place of your signature affirming your declaration.

IMPORTANT NOTES

The Board's forms, Notices, Information Bulletins, Rules of Procedure and Filing Guide may be obtained from its website <http://www.olrb.gov.on.ca> or by calling 416-326-7500 or toll-free at 1-877-339-3335.

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COLLECTION AND DISCLOSURE OF INFORMATION AND DOCUMENTS

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E-FILING AND E-MAIL

The Rules of Procedure and Filing Guide set out the permitted methods of filing. Forms and submissions may be filed with the Board by a variety of methods including the Board's e-filing system, but not by e-mail. Note that the e-filing system is not encrypted and e-filing is optional. Contact the Client Services Coordinator at the numbers listed above if you have questions regarding e-filing or other filing methods. If you provide an e-mail address with your contact information, the Board will in most cases communicate with you by e-mail from an out-going only generic account. Incoming emails are not permitted.

HEARINGS AND DECISIONS

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The Board issues written decisions, which may include the name and personal information about persons appearing before it. Decisions are available to the public from a variety of sources including the Ontario Workplace Tribunals Library and www.canlii.org. Some summaries and decisions may be found on the Board's website.

Documents to be Delivered

Before filing your application with the Board, you must deliver the following documents to each Responding Party and Affected Party named in Part A of this application:

- A completed copy of this Application for Accreditation, Construction Industry (Form A-92), **including all documents you are filing with this form**; and
- A Notice to Responding Party and/or Affected Party of Application for Accreditation, Construction Industry (Form C-39) **with the names of the parties and the date inserted**.

Note to each Responding Party and Affected Party: The documents listed above should have been delivered to you by the Applicant. The applicable response/intervention form is **Form A-93**.

Once the above-listed documents have been delivered to the other parties, you must complete the following Certificate of Delivery before filing the completed form and attachments with the Board.

I have reviewed this form to confirm it is complete *

Date (yyyy/mm/dd) *

2024/05/24

Certificate of Delivery

I, Christa Ambrose, Legal Assistant,
Name * Title

certify that the documents identified above were delivered to each of the parties as set out below:

Note: You must complete delivery information for each party separately.

Delivered To

Name of organization (if applicable) and name and title of person to whom the documents were delivered *

Mr. Lorne Richmond, Goldblatt Partners LLP, Counsel, Labourers' International Union of North America, Local 837

Address or fax number to which the documents were delivered *

416-591-7333

Method of delivery *

Hand Delivered Courier Fax Regular Mail Other

Fax Details *

The documents were delivered by fax on _____, at 2 : 00 a.m. p.m.

Delivered To

Name of organization (if applicable) and name and title of person to whom the documents were delivered *

Mr. Riccardo Persi, Business Manager, Labourers' International Union of North America, Local 837

Address or fax number to which the documents were delivered *

905-529-2723

Method of delivery *

Hand Delivered Courier Fax Regular Mail Other

Fax Details *

The documents were delivered by fax on _____, at 2 : 00 a.m. p.m.

File with the Board

- File the completed form and any attachments using a method permitted by the Board's Rules of Procedure.
- Save and Print a copy of your completed form and all attachments as the Board will not return them to you.
- To e-file, click the "Submit" button below. You will receive a confirmation email once the form has been successfully submitted.
- If you choose not to e-file, print this form by clicking on the "Print" button below and then file with the Board together with any attachments.

For E-Filing only

You must provide a valid email address in order to file this form electronically so that a confirmation email may be sent to you. If you do not have a valid email address, file a paper copy of this form using an alternative method permitted by the Board's Rules of Procedure.

Submitted By:

First Name *	Last Name *
Christa	Ambrose
Email Address *	Confirm Email Address *
cambrose@filion.on.ca	cambrose@filion.on.ca

APPENDIX "A" TO FORM A-92 APPLICATION FOR ACCREDITATION

All employers of construction labourers engaged in the on-site construction of single and semidetached houses, row houses, maisonettes and townhouses for whom the Labourers' International Union of North America, Local 837 has bargaining rights in Ontario Labour Relations Board Geographic Areas 4, 5, 6, and 26 in the residential sector of the construction industry, save and except employers bound by and performing work under the Collective Agreement between the Ontario Formwork Association and the Formwork Council of Ontario.

Appendix B
List of Employers in the Bargaining Unit

1. Ambria Residential Inc.
2. Averton Residential
3. Cachet Homes Corp.
4. Cairnwood Developments Inc.
5. ECMI Management Inc.
6. Geolin Services Limited
7. Heathwood Homes Ltd.
8. LIV Communities

ONTARIO LABOUR RELATIONS BOARD

NOTICE TO RESPONDING PARTY AND/OR AFFECTED PARTY OF APPLICATION FOR ACCREDITATION, CONSTRUCTION INDUSTRY

Labour Relations Act, 1995

Form C-39

Between:

SOUTHWEST RESIDENTIAL CONSTRUCTION LABOUR BUREAU

Applicant(s)

- and -

LABOURERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 837

Responding Party(ies)

- All forms, Notices, Information Bulletins, the Filing Guide and the Rules of Procedure may be obtained from the Ontario Labour Relations Board's website at (<http://www.olrb.gov.on.ca>) or the Board's offices, 505 University Ave., 2nd floor, Toronto, Ontario (Tel. 416-326-7500).
- Periods of time referred to in this Notice, other Board forms and Notices and the Board's Rules of Procedure do not include weekends, statutory holidays or any other day that the Board is closed.

1. The Applicant has initiated an application with the Ontario Labour Relations Board to be accredited as the bargaining agent for employers, whose employees are bargained for by the Responding Party, in a unit of employees that the Applicant claims is appropriate for accreditation. A copy of the application is enclosed.
2. This notice is being sent to you because you are a Responding Party to the application or because you have been identified as a person who may be affected by the application.
3. **An application under the Labour Relations Act is a legal proceeding and may affect your legal rights and obligations. You may wish to seek legal advice immediately.**
4. You should carefully read the Board's Rules of Procedure, which describe how a response/intervention must be delivered and filed with the Board, what information must be provided and the time limits that apply.
5. **IF YOU ARE THE RESPONDING PARTY:**
 - (a) Your response (**Form A-93** available at <http://www.olrb.gov.on.ca> or at the Board's offices) must be filed with the Board no later than **10 days** after the application was delivered to you.
 - (b) **Before** filing your response with the Board, you must deliver a copy of it (including all documents you are filing with it) to each Applicant, Responding Party and Affected Party named in Part A of the application and to each Affected Party named in Part A of a response/intervention filed by another party. If you are naming any additional

Affected Party in your response, you must provide them with a copy of the application (including all documents filed with it), your response (including all documents you are filing with it) and this notice.

Your response may be delivered to the other parties in accordance with Rule 6.4 of the Board's Rules of Procedure.

(c) You may **then file your response with the Board** by any method, except fax, e-mail or registered mail.

6. **IF YOU HAVE BEEN NAMED AS A PARTY WHO MAY BE AFFECTED BY THE APPLICATION**, and **if you choose** to participate in this proceeding:

(a) Your intervention (**Form A-93** available at <http://www.olrb.gov.on.ca/> or at the Board's offices) must be filed with the Board no later than **10 days** after the application was delivered to you.

(b) **Before** filing your intervention with the Board, you must deliver a copy of it (including all documents you are filing with it) to each Applicant, Responding Party and Affected Party named in Part A of the application and to each Affected Party named in Part A of a response/intervention filed by another party. If you are naming any additional Affected Party in your intervention, you must provide them with a copy of the application (including all documents filed with it), your intervention (including all documents you are filing with it) and this notice.

Your intervention may be delivered to the other parties in accordance with Rule 6.4 of the Board's Rules of Procedure.

(c) You may **then file your intervention with the Board** by any method, except fax, e-mail or registered mail.

7. **If you do not file your response/intervention and other required documentation in the way required by the Board's Rules of Procedure, the Board may not process your response/intervention and documents, and may decide the application without further notice to you. Furthermore, you may be deemed to have accepted all the facts stated in the application.**

8. Once the application is filed, the Board sends a Confirmation of Filing to all the parties with a Board file number and information about the appointment of a Mediator.

9. If you do not receive a Confirmation of Filing from the Board within seven days after you receive the application, you may wish to contact the Board.

Dated:

Catherine Gilbert

The Registrar
Ontario Labour Relations Board

NOTE: All communications should be addressed to:
The Registrar
Ontario Labour Relations Board
505 University Avenue, 2nd Floor
Toronto, Ontario M5G 2P1
Tel (416) 326-7500

IMPORTANT NOTES

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ACCESSIBILITY AND ACCOMMODATION

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ONTARIO LABOUR RELATIONS BOARD

RESPONSE/INTERVENTION – APPLICATION FOR ACCREDITATION CONSTRUCTION INDUSTRY *Labour Relations Act, 1995*

Form A-93

Fields marked with an asterisk (*) are mandatory.

OLRB File Number

Between: *

Applicant

- and -

Responding Party

- Review Information Bulletin No. 33 – “Accreditation in the Construction Industry under s.136 of the *Labour Relations Act, 1995* (Non-ICI)”, the Filing Guide and the Board’s Rules of Procedure on acceptable methods of delivery and filing **before** completing this form to avoid any delay in processing.
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Choose one of the following *

Response

Intervention

Part A Contact Information

Instructions

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- For an organization, provide the name and contact information of an individual who will be able to respond on behalf of that organization. When adding multiple individuals at the same organization, “Add” an additional contact section, repeat the organization name and provide that individual’s contact information (e.g. name, email address, phone number).

1 (a). Responding Party/Intervenor**Responding Party/Intervenor 1**Type * Organization Individual

Organization Name

First Name		Last Name		Position/Title	
Full Address (Number, Street, Unit/Apartment, Building Name)				Other Address Details (e.g. PO Box, R.R. #, c/o)	
City/Town		Province/State	Country		Postal/Zip Code
Telephone Number	Ext.	Fax Number	Email Address		

Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

1 (b). Representative/Contact Person for the Responding Party/Intervenor**1 (c). The Intervenor claims to be affected by the application for the following reason(s):**

Complete this question only if you are intervening in this case.

2 (a). Affected Party

Contact information for any person, trade union, employer or employers' organization which may be affected by the application and which has not already been identified by another party must be completed below.

2 (b). Representative/Contact Person for the Affected Party, if known**2 (c). The person, trade union, employer or employers' organization named above is affected by the application for the following reason(s):**

Part B Material Facts and Position on Relief Sought

- 3. Provide a detailed description of unit of employers claimed by the Responding Party/Intervenor to be appropriate for accreditation:**

Reference **must** be made to the sector(s) of the construction industry and the geographic area(s) or parts thereof claimed. If you require more space, attach a separate document.

-
- 4. Provide representations as to the appropriateness of the unit described in question 3 including the history of collective bargaining, if any, of the Applicant and the Responding Party:**

If you require more space, attach a separate document.

-
- 5. State the number of employers in the unit described by the Applicant as being appropriate for accreditation as of the date the application was made:**

-
- 6. State the number of employers in the unit claimed by the Responding Party/Intervenor to be appropriate for accreditation as of the date the application was made:**

-
- 7. State the approximate number of members of the Responding Party working in the area(s) and sector(s) described in the unit of employers claimed by the Applicant to be appropriate as of the date the application was made:**

-
- 8. In respect of the order(s) requested by the Applicant, the Responding Party/Intervenor states:**

9. Other relevant statements:

10. Attached documents:

Provide a list of the documents you are filing together with this form as instructed below.

Name your documents/attachments so that they are easily identifiable.

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The Board is committed to providing an inclusive and accessible environment in which all members of the public have equitable access to our services. We will aim to meet our obligations under the *Accessibility for Ontarians with Disabilities Act* in a timely manner. Please advise the Board if you require any accommodation to meet your individual needs. The Board's Accessibility Policy can be found on its website.

COLLECTION AND DISCLOSURE OF INFORMATION AND DOCUMENTS

Any relevant information that you provide to the Board must in the normal course be provided to the other parties to the proceeding. Personal information collected on this form and in written or oral submissions may be used and disclosed for the proper administration of the Board's governing legislation and case processing. In addition, the *Tribunal Adjudicative Records Act, 2019* requires that the Board make adjudicative records (which include applications filed and a listing of such applications) available to the public. The Board has the power to make part or all of an adjudicative record confidential. The *Freedom of Information and Protection of Privacy Act* may also address the treatment of personal information. More information is available on the Board's website www.olrb.gov.on.ca. If you have any questions concerning the collection of information or disclosure of adjudicative records, contact the Solicitors' Office at the number listed above or in writing to the OLRB, 505 University Ave., 2nd floor, Toronto, ON M5G 2P1.

E-FILING AND E-MAIL

The Rules of Procedure and Filing Guide set out the permitted methods of filing. **In the event of emergencies or other circumstances, the Board may post a Notice to Community on its website, which will prevail over the Rules of Procedure and Filing Guide. You should check the Board's website prior to filing.** Note that the e-filing system is not encrypted. Contact the Client Services Coordinator at the numbers listed above if you have questions regarding e-filing or other filing methods. If you provide an e-mail address with your contact information, the Board will in most cases communicate with you by e-mail from an out-going only generic account. Incoming emails are not permitted.

HEARINGS AND DECISIONS

Hearings are open to the public unless the Board decides that matters involving public security may be disclosed or if it believes that disclosure of financial or personal matters would be damaging to any of the parties. Hearings are not recorded and no transcripts are produced.

The Board issues written decisions, which may include the name and personal information about persons appearing before it. Decisions are available to the public from a variety of sources including the Ontario Workplace Tribunals Library and www.canlii.org. Some summaries and decisions may be found on the Board's website.

Documents to be Delivered

Before filing your response/intervention with the Board, you must deliver the following documents to each Applicant, Responding Party and Affected Party named in Part A of the application and to each Affected Party named in Part A of a response/intervention filed by another party:

- A completed copy of this Response/Intervention - Application for Accreditation, Construction Industry (Form A-93), **including all documents you are filing with this form.**

If you have named an Affected Party in Part A of your response/intervention that was **not** named in the application or in a response/intervention filed by another party, you must deliver the following documents to that party:

- A completed copy of the Application for Accreditation, Construction Industry (Form A-92), **including all documents filed with that form;**
- A completed copy of this Response/Intervention - Application for Accreditation, Construction Industry (Form A-93), **including all documents you are filing with this form;** and
- A Notice to Responding Party and/or Affected party of Application for Accreditation, Construction Industry (Form C-39) **with the names of the parties and the date inserted.**

Once the above-listed documents have been delivered to the other parties, you must complete the following Certificate of Delivery before filing the completed form and attachments with the Board.

<input type="checkbox"/> I have reviewed this form to confirm it is complete *	Date (yyyy/mm/dd) *
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Certificate of Delivery

I, _____, _____,
Name * Title

certify that the documents identified above were delivered to each of the parties as set out below:

Note: You must complete delivery information for each party separately.

Delivered To

Name of organization (if applicable) and name and title of person to whom the documents were delivered *

Address or fax number to which the documents were delivered *

Method of delivery *

Hand Delivered Courier Fax Regular Mail Other

File with the Board

- File the completed form and any attachments using a method permitted by the Board's Rules of Procedure.
- Save and Print a copy of your completed form and all attachments as the Board will not return them to you.
- To e-file, click the "Submit" button below. You will receive a confirmation email once the form has been successfully submitted.
- If you choose not to e-file, print this form by clicking on the "Print" button below and then file with the Board together with any attachments.

For E-Filing only

You must provide a valid email address in order to file this form electronically so that a confirmation email may be sent to you. If you do not have a valid email address, file a paper copy of this form using an alternative method permitted by the Board's Rules of Procedure.

Submitted By:

First Name *

Last Name *

Email Address *

Confirm Email Address *