

SUPREME COURT OF YUKON

Between

Appellant

and

Respondent

NOTICE OF APPEAL

TAKE NOTICE that [*name and address of appellant*] _____
appeals to the Supreme Court of Yukon from the Order [*or decision*] of [*state
name of person, court, or body appealed from*] _____
_____ pronounced on [*date*] _____
_____. [*If the appeal is from a part of the judgment only,
please specify the part*]

1. The appeal lies to this court pursuant to [*set out Act, Statute, Regulation or Rule*] _____.
2. The grounds of appeal are [*set out concisely grounds of appeal*]:
3. The Order sought is: _____.

AND TAKE NOTICE THAT an application will be made to the case management judge for directions as to the conduct of the appeal on:

Date _____

Time _____

Place: The Law Courts, 2134 Second Avenue, Whitehorse, Yukon, Y1A 5H6

IF YOU INTEND to oppose the appeal, YOU MUST GIVE NOTICE of your intention by filing an Appearance in Form 9 in this court and YOU MUST ALSO DELIVER a copy the Appearance to the appellant’s address for delivery, which is set out in this Notice of Appeal.

YOU OR YOUR LAWYER may file the Appearance. You may obtain the Appearance form at the registry.

TIME FOR APPEARANCE

If this Notice of Appeal is served on a person in Yukon, the time for appearance by that person is 7 days from the service (not including the day of service).

If this Notice of Appeal is served on a person outside Yukon, the time for appearance by that person after service is 21 days in the case of a person residing anywhere within Canada, 28 days in the case of a person residing in the United States of America, and 42 days in the case of a person residing elsewhere.

[or, if the time for appearance has been set by order of the court, within that time.]

(1) The address of the registry is:

The Law Courts
2134 Second Avenue
Whitehorse, Yukon.
Y1A 5H6
Telephone: (867) 667-5937
Fax: (867) 393-6212

(2) The appellant's ADDRESS FOR DELIVERY (**Required**: Residential address or business address **AND** postal address in Yukon) is:

Optional:
Fax number for delivery:
Email address:
Telephone:

(3) The name and office address of the appellant's lawyer is:

Dated _____

Appellant [or appellant's lawyer]

To [name of person, court, or body appealed from] _____

And to [all other persons who may be affected] _____