|  |  |
| --- | --- |
| Date:  |       |
|  |
| **REQUEST TO LISTEN TO A COURT RECORDING** |
|  |  |  |
| **Style of Cause:** |       |
|  |
| **File Number(s):** |       |
|  |
| **Date(s) of Proceedings:** |       |
|  |
| **Court Proceedings:** | [ ]  Civil | [ ]  Criminal |
|  |  |  |  |
| **Court Type:** | [ ]  Supreme | [ ]  Territorial | [ ]  Small Claims |
|  |
|  | [ ]  Court of Appeal | [ ]  Youth Criminal Justice |
|  |
| **WHEN ORDERING PROCEEDINGS ENSURE THAT THE PERSON ORDERING IS IN COMPLIANCE WITH THE COURT ACCESS GUIDELINES** |
| **Name of Justice, Judge or Justice of the Peace:** |
| [ ]  Justice Veale | [ ]  Justice Gower | [ ]  Deputy Justice |       |
| [ ]  Judge Chisholm | [ ]  Judge Cozens | [ ]  Judge Ruddy |
| [ ]  Deputy Judge |       | [ ]  J/P |       |
|  |  |  |  |
| **Courtroom Number:** | [ ]  Courtroom 1 | [ ]  Courtroom 2 | [ ]  Courtroom 3 |
|  |  |  |  |
|  | [ ]  Courtroom 4 | [ ]  Courtroom 5 |  |
|  |  |  |
|  | [ ]  Court Circuit: |       |
|  |
| **Party:** | [ ]  Yes | [ ]  No |  |
|  |
| **Recording Type:** | [ ]  Excerpt | [ ]  Full |  |
|  |  |  |  |
| **Excerpt of Recording:** | From: |       | To: |       |
|  |  | Tape counter number |  | Tape counter number |
|  |  |  |  |
| **Requested By:** |  |  |  |
|       |
| Name, address and telephone number      |
| Email address |
| Office Use Only |
|  |
| [ ]  Request Approved | [ ]  Request Denied |
|  |  |       |
| Judge’s Signature |  | Date |
|  |
| Date and time to listen to recording: |       |
|  |
|  |  |       |
| Applicant advised by clerk |  | Date |
| Date:  |       |
|  |
| **DEMANDE D’ÉCOUTE D’UN ENREGISTREMENT D’INSTANCE**  |
|  |  |  |
| **Intitulé :** |       |
|  |
| **Numéro(s) de dossier :** |       |
|  |
| **Date(s) de l’instance :** |       |
|  |
| **Instance :** | [ ]  civile | [ ]  criminelle |
|  |  |  |  |
| **Juridiction :** | [ ]  Cour suprême | [ ]  Cour territoriale | [ ]  Cour des petites créances |
|  |
|  | [ ]  Cour d’appel | [ ]  Justice pénale pour les adolescents |
|  |
| **S’ASSURER QUE L’AUTEUR D’UNE DEMANDE DE PROCÉDURE EST EN CONFORMITÉ AVEC LES LIGNES DIRECTRICES DE LA COUR CONCERNANT L’ACCÈS** |
| **Nom du juge ou du juge de paix :** |
| [ ]  Monsieur le juge Veale | [ ]  Monsieur le juge Gower | [ ]  Juge suppléant |       |
| [ ]  Monsieur le juge Chisholm | [ ]  Monsieur le juge Cozens | [ ]  Madame la juge Ruddy |
| [ ]  Juge suppléant |       | [ ]  Juge de paix |       |
|  |  |  |  |
| **Numéro de salle d’audience :** | [ ]  Salle no 1 | [ ]  Salle no  2 | [ ]  Salle no 3 |
|  | [ ]  Salle no 4 | [ ]  Salle no 5 |  |
|  | [ ]  circuit judiciaire: |       |
|  |
| **Partie :** | [ ]  Oui | [ ]  Non |  |
|  |
| **Genre d’enregistrement :** | [ ]  Extrait | [ ]  Enregistrement intégral |
|  |  |  |  |
| **Auteur de la demande :** |  |  |  |
|       |
| Nom, adresse et numéro de téléphone      |
| Adresse courriel |
| À l’usage du bureau  |
|  |
| [ ]  Demande approuvée | [ ]  Demande rejetée |
|  |  |       |
| Signature du juge |  | Date |
|  |
| Date et heure de l’écoute: |       |
|  |
|  |  |       |
| Auteur de la demande informé par le greffier |  | Date |