## In the Supreme Court of Newfoundland and Labrador CR FORM 11.02

RFT	WEEN:	Supreme Court File #:	CR		
DEI	I VV ISISIN.				
HIS	S MAJES	STY THE KING (Applicant/Respondent)			
v		(Applicant/Respondent)			
		(name of accused)			
		SUMMARY OF CURRENT DOCUMENT			
		Court File Numbers(s):			
		Date of Filing of			
		Document:			
		Name of Filing Party or			
		Person:			
		Application to which			
		Document			
		being filed relates:			
		Statement of purpose in			
		filing:			
		Court Sub-File Number, if			
		any			
		NOTICE OF APPLICATION			
TAK	KE NOTIC	CE that on the day of, 20 at			
		in the forenoon/afternoon at the court house located at			
		, in the judicial centre of			
		•			
		, in the province of Newfoundland and Labrad	or,		
		a date for the hearing of this application will be assigned;			
		OR			
		this application will be heard.			
1.					
1.	The acc	cused is charged with the following offences in relation to this application.			
2.		pplicant seeks an order granting the following relief: (list the relief sought and if			
арри	cavie, the se	ection of the Criminal Code under which the application is brought)			

3. provisio	The gr		for the application a	re: (list the grounds for the application including any statutory			
4. to be re	The A	pplica	nt relies on the follow	wing in support of this application: (list the documents, etc.			
5.	The he	earing	for this application v	vill require approximately hours/days.			
6.		The a	accused is not in cust	ody.			
		OR					
		The a	accused is in custody	at and and			
		the accused is required to be present at the hearing of the application in accordance with clause (i), (ii) or (iii) of paragraph 650.01(3)(a) of the <i>Criminal Code</i> .					
			the accused wishe	s to be present for the hearing of the application.			
			the accused does r	not wish to be present for the hearing of the application.			
7.	Check	ck all that apply to this proceeding:					
			A resolution confe	erence was held on			
			A pre-trial confere	ence was held on			
<b>DATED</b> this day of		day of					
				(signature of applicant or counsel) Address:			
				Tel:			
				Fax·			