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| *ONTARIO* | | | |  | | | | | | | | |
| **Superior Court of Justice** | | | | | | | | Notice of Garnishment Hearing | | | | |
|  | | | Form 20Q Ont. Reg. No*.* 258/98 | | | | | | | | | |
|  | | |  | | | | | | | |  |  |
| Small Claims Court | | | | | | | |  | Claim No. |
|  | | | | | | | |  |  |
| Garnishment No. |
| Address | | | | | | | |  |
|  | | | | | | | |  |
|  | | | Phone number | | | | | | | |  |  |
| **Creditor** | |  | | | | | | | Additional creditor(s) listed on the attached Form 1A. | | | |
| Last name, or name of company | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| First name | | | | | Second name | | | | | Also known as | | |
|  | | | | |  | | | | |  | | |
| Address (street number, apt., unit) | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| City/Town | | | | | | Province | | | | Phone no. | | |
|  | | | | | |  | | | |  | | |
| Postal code | | | | | | | Email address | | | | | |
|  | | | | | | |
| Representative | | | | | | | | | | Law Society of Ontario no. | | |
|  | | | | | | | | | |  | | |
| Address (street number, apt., unit) | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| City/Town | | | | | | Province | | | | Phone no. | | |
|  | | | | | |  | | | |  | | |
| Postal code | | | | | | | Email address | | | | | |
|  | | | | | | |
| **Debtor** | | | | | | | | | | | | |
| Last name, or name of company | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| First name | | | | | Second name | | | | | Also known as | | |
|  | | | | |  | | | | |  | | |
| Address (street number, apt., unit) | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| City/Town | | | | | | Province | | | | Phone no. | | |
|  | | | | | |  | | | |  | | |
| Postal code | | | | | | | Email address | | | | | |
|  | | | | | | |
| Representative | | | | | | | | | | Law Society of Ontario no. | | |
|  | | | | | | | | | |  | | |
| Address (street number, apt., unit) | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| City/Town | | | | | | Province | | | | Phone no. | | |
|  | | | | | |  | | | |  | | |
| Postal code | | | | | | | Email address | | | | | |
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|  | | | | | | | | | | | | |
| **NOTE:** | The Notice of Garnishment Hearing must be served by the person requesting the hearing on the creditor, debtor, garnishee, co-owner of debt, if any, and any other interested person [R. 8.01(9)]. | | | | | | | | | | | |
| Les formules des tribunaux sont affichées en anglais et en français sur le site [www.ontariocourtforms.on.ca](http://www.ontariocourtforms.on.ca/). Visitez ce site pour des renseignements sur des formats accessibles. | | | | | | | | | | | | |

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| **FORM 20Q** | **PAGE 2** | | | | | | | | |  |
|  |  | | | | | | | | | Claim No. |
|  |  | | | | | | | | |  |
|  |  | | | | | | | | | Garnishment No. |
| **Garnishee** | | | | | | | | | | |
| Last name, or name of company | | | | | | | | | | |
|  | | | | | | | | | | |
| First name | | Second name | | | | | | | Also known as | |
|  | |  | | | | | | |  | |
| Address (street number, apt., unit) | | | | | | | | | | |
|  | | | | | | | | | | |
| City/Town | | | Province | | | | | | Phone no. | |
|  | | |  | | | | | |  | |
| Postal code | | | | Email address | | | | | | |
|  | | | |
| Representative | | | | | | | | | Law Society of Ontario no. | |
|  | | | | | | | | |  | |
| Address (street number, apt., unit) | | | | | | | | | | |
|  | | | | | | | | | | |
| City/Town | | | Province | | | | | | Phone no. | |
|  | | |  | | | | | |  | |
| Postal code | | | | Email address | | | | | | |
|  | | | |
| Co-Owner of Debt (if any) | | | | | |  | | Additional co-owner(s) listed on attached Form 1A. | | |
| Last name, or name of company | | | | | | | | | | |
|  | | | | | | | | | | |
| First name | | Second name | | | | | | | Also known as | |
|  | |  | | | | | | |  | |
| Address (street number, apt., unit) | | | | | | | | | | |
|  | | | | | | | | | | |
| City/Town | | | Province | | | | | | Phone no. | |
|  | | |  | | | | | |  | |
| Postal code | | | | Email address | | | | | | |
|  | | | |
| Representative | | | | | | | | | Law Society of Ontario no. | |
|  | | | | | | | | |  | |
| Address (street number, apt., unit) | | | | | | | | | | |
|  | | | | | | | | | | |
| City/Town | | | Province | | | | | | Phone no. | |
|  | | |  | | | | | |  | |
| Postal code | | | | Email address | | | | | | |
|  | | | |
| Other Interested Person (if any) | | | | | |  | Additional interested person(s) listed on attached Form 1A. | | | |
| Last name, or name of company | | | | | | | | | | |
|  | | | | | | | | | | |
| First name | | Second name | | | | | | | Also known as | |
|  | |  | | | | | | |  | |
| Address (street number, apt., unit) | | | | | | | | | | |
|  | | | | | | | | | | |
| City/Town | | | Province | | | | | | Phone no. | |
|  | | |  | | | | | |  | |
| Postal code | | | | | Email address | | | | | |
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| Representative | | | | | | | | | Law Society of Ontario no. | |
|  | | | | | | | | |  | |
| Address (street number, apt., unit) | | | | | | | | | | |
|  | | | | | | | | | | |
| City/Town | | | Province | | | | | | Phone no. | |
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| Postal code | | | | Email address | | | | | | |
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| **FORM 20Q** | | | | | | | | **PAGE 3** | | | | | | | | | | | | |  | | | |
|  | | | | | | | |  | | | | | | | | | | | | | Claim No. | | | |
|  | | | | | | | |  | | | | | | | | | | | | |  | | | |
|  | | | | | | | |  | | | | | | | | | | | | | Garnishment No. | | | |
| **TO THE PARTIES:** | | | | | | | | | | | | | | | | | | | | | | | | |
| (The person requesting this garnishment hearing or the person’s representative must contact the clerk of the court to choose a time and date when the court could hold this garnishment hearing.) | | | | | | | | | | | | | | | | | | | | | | | | |
| **THIS COURT WILL HOLD A GARNISHMENT HEARING on** | | | | | | | | | | | | | | | | | |  | | | | **, 20** |  | **, at** |
|  | | | | | | | | | **, or as soon as possible after that time** | | | | | | | | | | | | | | | |
| (Time) | | | | | | | | |  | | | | | | | | | | | | | | | |
|  | | by videoconference | | | | | | | | | | | | | | | | | | | | | | |
|  | | in person | | | | | | | | | | | | | | | | | | | | | | |
| **at** |  | | | | | | | | | | | | | | | | | | | | | | | |
|  | (Videoconference details or address of court location and courtroom number, as applicable) | | | | | | | | | | | | | | | | | | | | | | | |
| because *(Check the appropriate box.)* | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | the creditor | | | |  | | | | the debtor | | | | |  | the garnishee | |  | the co-owner of debt | | | | |
|  | | | other interested person: | | | | | | |  | | | | | | | | | | | | | | |
|  | | |  | | | | | | | (Specify) | | | | | | | | | | | | | | |
| states the following: | | | | | | *(In numbered paragraphs, provide details of your dispute and the order(s) requested.)* | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | **Additional pages are attached because more space was needed.** | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | , 20 |  |  |  | | | | | | | | | |
|  | | | | | | | | | | | |  |  |  | (Signature of party or representative) | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| **NOTE:** | | | | | **If you fail to attend this garnishment hearing, an order may be made in your absence and enforced against you.** | | | | | | | | | | | | | | | | | | | |