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	

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. Visitez ce site pour des renseignements sur des formats accessibles.

Continued on next page

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	
Representative		Law Society of Ontario no.
Address (street number, apt., unit)		
City/Town	Province	Phone no.
Postal code	Email address	

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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.**

For information on accessibility of court services for people with disability-related needs, contact:

Telephone: 416-326-2220 / 1-800-518-7901 TTY: 416-326-4012 / 1-877-425-0575