

20

C.A. No.

Nova Scotia Court of Appeal

Between:

[name]

Appellant

and

[name]

Respondent

**Notice of Application for Leave to Appeal and Notice Appeal
(Interlocutory) or (Costs Only)**

To: [name and address of each respondent]

Appellant appeals

The appellant applies for leave to appeal and, if granted, will appeal from the [order/decision] dated _____, 20____ in the proceedings in the Supreme Court showing court number [insert trial court file number] granted by [name of judge] .

Order or decision appealed from

The [order/decision] was made on _____, 20____ . It was made at _____, Nova Scotia.

Grounds of appeal

The grounds of appeal are

- (1) [state grounds completely and concisely and include list of legislation relied on]
- (2)
- (3)

Order requested

The appellant says that the court should allow the appeal and that this [order/decision] appealed from be [reversed, rescinded/varied] and [describe requested relief] .

Motion for date and directions

The appeal will be heard on a date to be set by a judge. The appellant will ask a judge of the Court of Appeal to set that date and give directions on _____, 20____, at The Law Courts, 1815 Upper Water Street, Halifax, Nova Scotia. You have the right to be present or represented by counsel. If you are not present or represented, the judge may proceed without you.

Contact information

The appellant designates the following address:

Documents delivered to this address will be considered received by the appellant on delivery. Further contact information is available to each party through the prothonotary.

Signature

Signed _____, 20____

Signature of appellant
Print name:

OR

Signature of counsel
[name] as counsel
for [name]

Registrar’s Certificate

I certify that this notice of appeal was filed with the court on _____, 20____ .
