



Safety Standards Appeal Board
Courier Address:
 Unit 1270 – 605 Robson Street
 Vancouver, BC

Mailing Address:
 Unit 1270 – 605 Robson Street
 Vancouver, BC V6B 5J3

Phone: 604-398-6232
Fax: (250) 356-6645
E-mail: SafetyStandardsAppealBoard@gov.bc.ca

FORM 3 - CONFIDENTIALITY AGREEMENT - (Rule 24)

The information on this form is collected under the authority of the *Safety Standards Act* and will be used to process your appeal under the *Safety Standards Act* or the *Homeowner Protection Act*. If you have any questions about the collection and use of this information, contact the Registrar at the address shown above.

A. PARTY INFORMATION

Name of Party: _____

Contact Name: (if different) _____

Contact Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: () _____ Fax: () _____ E-mail: _____

Indicate preferred method of receiving correspondence: Mail Fax E-Mail

B. APPEAL NUMBER:

C. CONFIDENTIALITY AGREEMENT

I, _____, am an (employee, officer, employer, director etc.) of _____ (party).
 Signature

OR

I, _____, am the representative, agent, counsel etc.) for _____ (party).
 Signature

I DECLARE THAT:

- I have read the Rules of Practice and Procedure of the Safety Standards Appeal Board and all Orders of the Board that relate to this appeal.
- I understand that the Orders of the Board may be filed with the BC Supreme Court. I further understand that any breach of the terms of the Orders could be the subject of contempt proceedings in the BC Supreme Court.

I UNDERTAKE THAT:

- I will maintain the confidentiality of any information or evidence that I receive during the course of any settlement conference or mediation relating to an appeal before the Safety Standards Appeal Board and will not disclose any information or evidence that I receive during the course of that hearing.
- I will not reproduce in any manner, without the prior written approval of the Board, any information or evidence that I receive during the course of any settlement conference or mediation, or any notes, transcripts or written submissions dealing with information received, evidence taken and submissions made in any settlement conference or mediation.
- I will personally deliver to the [Registrar/designated official] at the end of any settlement conference or mediation all documents provided to me, including any transcript or written submissions.

D. AUTHORIZATION

 (Signature of Party, Representative, Agent or Counsel)

DATE _____