



Safety Standards Appeal Board  
**Courier Address:**  
 3rd Floor – 703 Broughton Street  
 Victoria, BC

**Mailing Address:**  
 PO Box 9239 Stn Prov Govt  
 Victoria BC V8W 9J1

**Phone:** 250) 387-4021  
**Fax:** (250) 356-6645.  
**E-mail:**  
 SafetyStandardsAppealBoard@gov.bc.ca

## FORM 4 – APPLICATION FOR A BOARD ORDER – (Rule 26)

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. APPLICANT INFORMATION

Name:			
Contact Name (if different):			
Contact Address (if not previously filed):			
City:	Province:	Postal Code:	
Telephone: (    )	Fax: (    )	E-mail:	
Indicate preferred method of receiving correspondence (if not previously filed)			
	<input type="checkbox"/> Mail	<input type="checkbox"/> Fax	<input type="checkbox"/> E-Mail

**B. APPEAL NUMBER** (if known):

### C. DESCRIPTION OF REQUESTED ORDER

Please describe the order you are requesting. e. g. an order deferring or dismissing an appeal; an order adding a party or intervener; an order to require a party to provide a document or thing relating to an appeal; to summons a witness; to adjourn a hearing; an order for costs, etc. (If more room is needed, please attach a separate sheet)

### D. REASON ORDER IS REQUIRED

Please explain the reason the order is required: (If more room is needed, please attach a separate sheet)

### E. GROUNDS FOR ORDER

Please explain the grounds for the application, identifying (if applicable) specific provisions of legislation, regulations and/or rules which support the application: (If more room is needed, please attach a separate sheet):

### F. EVIDENCE FILED IN SUPPORT OF THE APPLICATION

Please list and attach any evidence filed in support of the application:

### G. DESCRIPTION OF STEPS TAKEN TO RESOLVE THE ISSUE WITHOUT AN ORDER

Please provide details of any attempts to resolve the issue without an order. (If more room is needed, please attach a separate sheet)

### H. SIGNATURE

	Date _____
(Signature of Applicant)	