

APPLICATION FOR RENEWAL OF A SPECIAL AUTHORIZATION

For a person practising outside Québec (section 42.4 *Professional Code*)

PART A ■ APPLICANT'S INFORMATION

1. Personal information

Family name: _____ First name: _____
Complete address: _____

2. Professional contact information

Complete address: _____
Téléphone: _____ Fax: _____
E-mail: _____

3. Bar membership(s)

I am a member of the following bar(s)

Name of the bar: _____ Date of admission: _____
Member number: _____ Status: _____
Name of the bar: _____ Date of admission: _____
Member number: _____ Status: _____

Please attach to this application a certificate of good standing issued by the appropriate officer of the bar of which you are a member, attesting that you are authorized to practise law outside Québec.

4. I am making a renewal of this application in connection with the following case:

Name of the client: _____
Address of the client: _____
Court: _____ Judicial district: _____
14-digit court file number: _____
Brief description of the case: _____

☐ Class action: _____

5. I intend to retain the services of a member of the Barreau du Québec to serve as counsel:

YES ☐ NO ☐ Lawyer's name: _____ Member number: _____

Given the rules of civil procedure and the civil law applicable in certain cases, and to protect the public, the Barreau du Québec may request that lawyers applying for special authorization be assisted by legal counsel who is a member of the Barreau du Québec.

6. I am attaching a certificate from my professional liability insurer guaranteeing that my professional services in connection with the above-mentioned case are insured.

PART B ■ AUTHORIZATION AND DECLARATION

I undertake to practise law in Québec in accordance with this special authorization.

I undertake to abide by all the obligations set out in *An Act respecting the Barreau du Québec*, the *Code of ethics of advocates* and the other regulations of the Barreau du Québec.

I agree to indicate to the Barreau du Québec, **immediately**, any change in the information provided in this application.

Signature of the applicant

Affirmed on my oath at _____, this _____ day of _____ of the year _____

Renewal of the special authorization to practise duly granted on _____

President of the Barreau du Québec

This authorization is valid only for this case, until a final judgment has been rendered within a period of 12 months. It can be renewed.

RETURN BY EMAIL: permis@barreau.qc.ca

- ☐ this duly completed form ☐ a certificate of good standing
☐ a professional liability insurance certificate

Secretariat of Order