

Duty Counsel and Subsequent Representation Request/Acknowledgement

Date:

Name of Lawyer:

Name of Client:

Client DOB:

Duty Counsel Service Type provided: (please select one)

Criminal

Family

CFSA

Other Civil

Advice Lawyer

Special Duty Counsel

Date(s) of DC Service:

Place of DC Service:

Please provide a brief description of DC services provided: (e.g. drafting, advice only, guilty plea, remand)

Please only complete this portion of the form if you are:

1. **Requesting an exemption;** or
2. **Certifying a prior solicitor-client relationship;** or
3. **Providing notice of having previously acted under the authority of a Advice Lawyer - Family Violence 2 hour Authorization.**

1. Exemption Request (Select all of the factors that apply and provide details below)

Disability or Special Needs of the client

Substantial services already performed by Duty Counsel

The inability of the person to access counsel other than Duty Counsel

Unique skills of Duty Counsel to represent the client

To fulfil the intention of the French Language Services Act

Other

Please provide details for requesting exemption as they relate to the options selected in the above:

2. Certificate of Duty Counsel

This is to certify that _____ whom I assisted as Duty
Counsel on the _____ day of _____ 20____, had a previous lawyer-client
relationship with me, or with _____ who is associated with
me in the practice of law.

3. Was the prior retainer an LAO certificate?

Yes No

I acted under the authority of a "Advice Lawyer - Family Violence 2 hour Authorization dated:

Note: Please attach any additional information that you wish to be considered by the Director General or Designate.

Please submit to the appropriate district office for approval via email.

For Internal Purposes:

Director General approved/declined forms must be uploaded to PeopleSoft in the Notes section 365 side.

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Personal information contained on this form is collected under the authority of the Legal Aid Services Act, 2020 and will be used for the purpose of payment of accounts, investigations, and the administration of the Legal Aid Services Act.

Questions about this collection should be directed to the Privacy and Access to Information Officer at fippa@lao.on.ca or 1-800-668-8258.



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----- For internal use only. Please do not fill out. -----

Decision of the Director General or Designate

Date:

Exemption Approved

Exemption Denied

Director General or Designate signature: