## **COURT OF APPEAL FOR BRITISH COLUMBIA**

## FORM 5

## NOTICE OF HEARING OF APPEAL (RULES 33(2), 34(2))

		Court of Appeal File No.	
	[STAMP]		The file number can be found on the upper right corner of the Notice of Appeal.
		V.	
		Name of the first appellant named on Form 1: Notice of Appeal.	Name of the first respondent named on Form 1: Notice of Appeal.
To the party(ies) filing the Notice of Hearing of Appeal:  You are required to attach a copy of the orders under appeal to this form. The court will review any appeal set for one day or longer and			
may adjust the length.			
Address of the courthouse where the appeal will be heard			
	Date the appeal will be heard	time to be confi	irmed by court scheduler
		DD/MM/YYYY	
	mated length of appeal in days The default length for an appeal is half a day.		
		Appellant's estimate Re	espondent's estimate
I agree to pay all hearing fees payable under Item 5 of Division 1 of Schedule 2 – Court Fees.			
	Date form completed	Name of lawyer or party authorizing filing of this form	
		DD/MM/YYYY	