

RAP-5 – Notice of Response to Review or Appeal Request

|                                     |                                                                                    |                       |
|-------------------------------------|------------------------------------------------------------------------------------|-----------------------|
| TLA'AMIN NATION                     |  | Date received:        |
| Review and Appeal Law<br>Form RAP-5 |                                                                                    | _____                 |
| NOTICE OF RESPONSE                  |                                                                                    | Request number:       |
| TO REVIEW AND APPEAL REQUEST        |                                                                                    | _____                 |
|                                     |                                                                                    | (for office use only) |

**RESPONSE TO GROUNDS OF REVIEW OR APPEAL REQUEST:**  
*[BRIEFLY PROVIDE YOUR POSITION REGARDING THE APPLICANT'S REASONS SET OUT IN THE REVIEW OR APPEAL REQUEST, INCLUDING ANY RELEVANT ADDITIONAL FACTS]*

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**RESPONSE TO RELIEF SOUGHT:**  
*[SET OUT YOUR POSITION ON THE RELIEF SOUGHT IN THE REVIEW OR APPEAL REQUEST]*

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REVIEW AND APPEAL PANEL: RULES OF PROCEDURE

**RESPONDENT'S CONTACT INFORMATION:**

|                  |  |
|------------------|--|
| Full legal name: |  |
| Phone No.:       |  |
| Mailing address: |  |
| E-mail address:  |  |

**RESPONDENT'S AGENT'S CONTACT INFORMATION (IF APPLICABLE):**

|                  |  |
|------------------|--|
| Full legal name: |  |
| Phone No.:       |  |
| Mailing address: |  |
| E-mail address:  |  |

**ADDRESS FOR DELIVERY:**

[THIS WILL BE USED TO DELIVER ANY NOTICES IN RELATION TO THE REVIEW OR APPEAL REQUEST. NOTE: THE PANEL'S PREFERRED MEANS OF COMMUNICATION IS THROUGH E-MAIL]

**CHECK ONE:** ☐ Respondent's mailing address ☐ Respondent's e-mail address  
☐ Respondent's agent's mailing address ☐ Respondent's agent's e-mail address

[Attachments must be in Forms: RAP-2 Additional Information, RAP-3 Schedule(s), RAP-4 Declaration(s)]

**SIGNATURE:** \_\_\_\_\_

[THIS NOTICE OF RESPONSE MUST BE SIGNED BY THE RESPONDENT OR RESPONDENT'S AGENT]

Full name of respondent or agent: \_\_\_\_\_

Date: \_\_\_\_\_