



Financial Services
Commission
of Ontario
5160 Yonge Street,
Box 85
Toronto ON M2N 6L9

Motor Vehicle Accident Claims Fund Notice of Default

Claim Number:

IN THE _____
(Court)

IN THE MATTER OF the *Motor Vehicle Accident Claims Act*, R.S.O 1990, Chapter M.41, Section 4, as amended.

AND IN THE MATTER OF an action

BETWEEN :

PLAINTIFF(S)
and
DEFENDANT(S)

NOTICE IS HEREBY GIVEN TO the Minister of Finance pursuant to Section 8 of the *Motor Vehicle Accident Claims Act* that the Defendant has failed to (strike out inapplicable words)

- deliver a Notice of Intent to Defend
- deliver a Statement of Defence
- appear in person on Examination for Discovery (Certificate of Non-Attendance attached)
- appear in person or by counsel at trial

The Statement of Claim was issued on _____
(Date)

and was served personally on _____
(Name)

on _____ at _____
(Date) (Place)
(copy of Affidavit of Service attached)

or
was served substitutionally pursuant to the Order of _____

on _____
(Date)

(copy of Order and Affidavit of Service or Order and Statement of Claim)

or
was served pursuant to Section 3 of the *Motor Vehicle Accident Claims Act*, R.S.O. 1990, Chapter M.41.

(Strike out inapplicable words)

Date

Solicitors for the Plaintiff(s)