



Application for a Stay of a Direction Issued by an Official Delegated by the Minister of Labour

THE APPEAL		Identify the direction(s) you are appealing and applying to stay.
Case Number (if known)	Name of the Official Delegated by the Minister of Labour who Issued the Direction	
Name of the Appellant	Name of Organization Representing the Appellant (if applicable)	
Name and Title of the Appellant's Representative (if applicable)		
Name of the Respondent	Name and Title of the Respondent's Representative (if applicable)	

 GROUNDS FOR THE APPLICATION TO STAY THE DIRECTION	The applicant may submit this form at same time as the Notice of Appeal or at a later date. Attach additional pages if necessary.
Explain briefly why your appeal should succeed:	
Explain how the appellant would likely suffer significant harm if the Appeals Officer did not grant the stay. Attach any documents needed to support your explanation:	
Explain the measures that will be put in place to protect the health and safety of employees or any other persons granted access to the work place should the stay be granted:	

 Signature of Applicant

 Date

 Name of Signatory

 Total Number of Pages Submitted