



## Appendix B of the Ontario Securities Commission Practice Guideline E-hearings Checklist for Hearing on the Merits

MATTER INFORMATION	
<b>Matter Name</b>	
<b>Scheduled Dates for the Hearing on the Merits</b>	
<b>Name:</b> (Staff/Counsel/Respondent)	<b>Address:</b>  <b>Phone:</b> <b>Email:</b>
<b>A. PERMANENT I.T. EQUIPMENT SET-UP IN EACH HEARING ROOM</b> Each hearing room is equipped with the following: <ul style="list-style-type: none"><li>• For Staff:<ul style="list-style-type: none"><li>○ One laptop with internet access at the podium and is connected to the A/V system.</li><li>○ One laptop with internet access at the litigators' table and is connected to the A/V system.</li></ul></li><li>• For Respondents: One laptop with internet access at the podium and is connected to the A/V system. <b>All respondents will share the laptop at the podium to access the OSC Portal during the hearing.</b></li><li>• Each Litigators' table and witness stand has a monitor connected to the A/V system to display content.</li></ul>	
<b>B. TELEPHONE AND VIDEO-CONFERENCE SET-UP IN EACH HEARING ROOM</b> Each hearing room is equipped to make outgoing calls only on the Telephone Conference System and the Video Conference System.	
<b>C. ACCESS TO THE OSC PORTAL</b> Software is installed on OSC laptops in the hearing rooms to enable the parties to access the OSC Portal. The OSC Portal is a database on a closed network environment, which holds the hearing documents and parties will retrieve documents from this database, open them and then display them on the A/V system in the hearing room. <b><u>The OSC Portal can only be accessed on OSC laptops and is only for in hearing use.</u></b> In the event a party requires additional laptops beyond what is provided in the permanent I.T. equipment set-up (please see section A above), a request for an OSC laptop can be made. Please note in section H.	
<b>D. PERSONAL LAPTOPS</b> <ul style="list-style-type: none"><li>i. A Respondent may use their own personal laptop with a cellular/mobile internet connection (e.g. rocket stick or mobile phone hotspot). <b>Note that a personal laptop cannot be used to access the OSC Portal.</b></li><li>ii. In the event a Respondent does not have their own cellular/mobile internet connection, a request for internet access can be made. Please note in section G.</li></ul>	

**E. ELECTRONIC HEARING BRIEF**

**I. All documents must be formatted pursuant to the Protocol for E-filing and E-hearings (Protocol) in Appendix A of the Practice Guideline** and the Index File and Hearing Brief documents filed with the Registrar 5 business days before the commencement of the Hearing on the Merits.

The **Index File** is a document which is a comma delimited text file in “.csv” format (which can be created in Excel or other programs) that lists and describes all the pre-filed documents that will form part of the hearing brief. An example of the Index file is provided in Schedule I of the Protocol. Documents in the hearing brief shall be provided as separate searchable multi-page PDF (or PDF/A) documents (i.e. with embedded underlying optical character recognition (OCR) text data).

**II. In the event that a party cannot comply with the Protocol, the party shall raise this with a Commissioner at an attendance and the Commissioner will determine if a suitable alternative should be followed.**

In instances where a party cannot provide the Index File as required by the Protocol, they must still provide an Index list of all their documents, specifying the name of the document, description of the document and its format to accompany their hearing brief documents.

**F. E-HEARING DOCUMENT LOGISTICS**

*As set out above, the Protocol sets out the requirements for the format of documents in the hearing brief - separate searchable multi-page PDF (or PDF/A) documents.*

*In some instances, a document may exist in a different format which cannot be converted to a PDF. In such circumstances, the Registrar must be informed at least 10 business days before the commencement of the hearing to ensure that arrangements can be made to open and view the document in the hearing room.*

*The following is the information to provide to the Registrar if an alternative document format is being used:*

**If Documents Cannot be Provided in PDF Format fill out the following information on the right hand side.**  
**Alternative document formats (including paper) will be discussed with a Commissioner at an attendance and the Commissioner will determine if a suitable alternative should be followed.**

- (1) In Paper.**
  - (a) **Provide an Index List** indicating, Name of the Document; Description of the Document; Date of the Document.
  - (b) Total Number of Documents: \_\_\_\_\_
  - (c) Total Number of Pages: \_\_\_\_\_
- (2) If Electronic.**
  - (a) **Provide an Index List** indicating, Name of the Document; Description of the Document, Document Format; and file size.
  - (b) Specify Format (Example: Excel, jpeg, mp3)

**G. I.T. EQUIPMENT SET-UP AND OSC PORTAL TRAINING SESSION**

The Registrar will confirm I.T. equipment set-up and OSC Portal Training Sessions based on the parties' availability and hearing room availability. Please provide a list of dates and times of your availability.

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

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

**H. INDIVIDUALS PARTICIPATING IN THE HEARING ON THE MERITS**

For example: Jane Smith, Law Clerk

Name:	OSC Laptop: Yes <input type="checkbox"/> No <input type="checkbox"/>	Your own laptop: Yes <input type="checkbox"/> No <input type="checkbox"/>
Role:	Internet access: Yes <input type="checkbox"/> No <input type="checkbox"/>	Internet access: Yes <input type="checkbox"/> No <input type="checkbox"/>
Name:	OSC Laptop: Yes <input type="checkbox"/> No <input type="checkbox"/>	Your own laptop: Yes <input type="checkbox"/> No <input type="checkbox"/>
Role:	Internet access: Yes <input type="checkbox"/> No <input type="checkbox"/>	Internet access: Yes <input type="checkbox"/> No <input type="checkbox"/>
Name:	OSC Laptop: Yes <input type="checkbox"/> No <input type="checkbox"/>	Your own laptop: Yes <input type="checkbox"/> No <input type="checkbox"/>
Role:	Internet access: Yes <input type="checkbox"/> No <input type="checkbox"/>	Internet access: Yes <input type="checkbox"/> No <input type="checkbox"/>

**I. E-HEARING WITNESS LOGISTICS**

<b>Total Number of Witnesses</b>	
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**1. IN PERSON**

Witness Name:	Date:	Time:	Navigational Control: Yes <input type="checkbox"/> No <input type="checkbox"/>
Witness Name:	Date:	Time:	Navigational Control: Yes <input type="checkbox"/> No <input type="checkbox"/>
Witness Name:	Date:	Time:	Navigational Control: Yes <input type="checkbox"/> No <input type="checkbox"/>
Witness Name:	Date:	Time:	Navigational Control: Yes <input type="checkbox"/> No <input type="checkbox"/>
Witness Name:	Date:	Time:	Navigational Control: Yes <input type="checkbox"/> No <input type="checkbox"/>
Witness Name:	Date:	Time:	Navigational Control: Yes <input type="checkbox"/> No <input type="checkbox"/>

**2. BY VIDEO-CONFERENCE**

*The OSC video system is set up to make outgoing calls only. You must provide the Registrar with the contact name at the video conference facility, the contact phone number and I.P. address. OSC I.T. staff will test in advance of the hearing day and assist with establishing the connection on the day of the testimony.*

*Please indicate if you need to display documents to the remote witness. The method of sharing document display with a remote witness will depend on the technology capabilities of the remote site.*

*In the alternative, the remote witness can be provided with a hard copy of the documents ahead of time.*

Witness Name:	Date:  Time:	Location:  Document Sharing: Yes <input type="checkbox"/> No <input type="checkbox"/>	Facility contact name:  Facility phone no.:  Facility I.P address:
Witness Name:	Date:  Time:	Location:  Document Sharing: Yes <input type="checkbox"/> No <input type="checkbox"/>	Facility contact name:  Facility phone no.:  Facility I.P address:
Witness Name:	Date:  Time:	Location:  Document Sharing: Yes <input type="checkbox"/> No <input type="checkbox"/>	Facility contact name:  Facility phone no.:  Facility I.P address:
Witness Name:	Date:  Time:	Location:  Document Sharing: Yes <input type="checkbox"/> No <input type="checkbox"/>	Facility contact name:  Facility phone no.:  Facility I.P address: