

FORM 6  
LABOUR RELATIONS BOARD (PRINCE EDWARD ISLAND)  
APPLICATION FOR AMENDMENT OF CERTIFICATION ORDER

BETWEEN:

APPLICANT

AND:

RESPONDENT

1. Name of Applicant: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

2. Name of Respondent: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

3. The applicant requests an amendment to certification order number \_\_\_\_\_  
issued by the Board on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

4. Description of requested amendment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Name of any trade union or employee organization known to the applicant as claiming to be  
the bargaining agent of, or as claiming to represent, any employees affected by this application.  
\_\_\_\_\_

6. Reasons for requesting amendment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby declare that the statements made and information given herein are true in substance and  
in fact and I make this solemn declaration conscientiously believing it to be true, knowing that it  
is of the same force and effect as if made under oath and by virtue of the *Evidence Act* R.S.P.E.I.  
1988 Cap. E-11.

DECLARED by the \_\_\_\_\_ )  
before me at \_\_\_\_\_ )  
in the County of \_\_\_\_\_ )  
Province of \_\_\_\_\_ )  
this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_. )

\_\_\_\_\_  
A Commissioner for taking affidavits in the  
Supreme Court

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Title