



At any time after an application has been filed with the Tribunal, an interested person or organization or the Ontario Human Rights Commission may request to intervene in the application by completing this *Request to Intervene (Form 5)*.

**Follow these steps to make your request:**

1. Fill out this Form 5.
2. Deliver a copy of this Form 5 to all parties and any affected persons or organizations identified in the application or the response.
3. Complete a *Statement of Delivery (Form 23)*.
4. File this Form 5 and Form 23 with the Tribunal.

The Tribunal will determine whether to allow you to intervene and the extent to which you may participate in the proceedings.

**Information for all parties and any other person or organization who received a copy of this request:**

A person, organization or the Ontario Human Rights Commission (Commission) has made a request to the Tribunal to intervene in an application to which you are a party or a named affected person. The nature of the intervention is described below.

You may take no position in response to the request or, you may respond by completing a *Response to a Request for an Order (Form 11)*.

**Follow these steps to respond:**

1. Fill out Form 11.
2. Deliver a copy of Form 11 to the proposed intervenor and to all other parties and any other identified affected persons or organizations.
3. Complete a *Statement of Delivery (Form 23)*.
4. File Form 11 and Form 23 with the Tribunal.

Form 11 must be filed no later than **21 days** after this *Request to Intervene* was delivered to you.

Download forms from the Forms & Filing section of the HRTO web site at [tribunalsontario.ca/hrto](https://tribunalsontario.ca/hrto). If you need a paper copy or accessible format, contact us:

Human Rights Tribunal of Ontario  
15 Grosvenor Street, Ground Floor  
Toronto, ON M7A 2G6

Phone: 416-326-1312 Toll-free: 1-866-598-0322

TTY: 416-326-2027 Toll-free: 1-866-607-1240

Email: [hrto.registrar@ontario.ca](mailto:hrto.registrar@ontario.ca)

**Application Information**

Tribunal File Number:	2019-36509-I to 2019-36519-I and 2019-36521-I to 2019-3623-I
Name of Applicant:	Bile Ali, et al.
Name of Each Respondent:	Hazeltree Investments Inc.; City of Ottawa; Mustang Equities Inc.; TC Core GP: TC Core LP

**Part A: For completion by the Proposed Intervenor (other than the Commission)****A1. Contact Information for the Proposed Intervenor (other than the Commission)**Please provide your contact information. Complete **a) Individual** or **b) Organization**.**a) Individual**

First (or Given) Name		Last (or Family) Name		
Street Number	Street Name			Apt/Suite
City/Town		Province	Postal Code	Email
Daytime Phone	Cell Phone		Fax	TTY

What is the best way to send information to you? ☐ Mail ☐ Email ☐ Fax  
(If you check email, you are consenting to the delivery of documents by email.)

**b) Organization**

Full Name of Organization CANADIAN CENTRE FOR HOUSING RIGHTS				
Contact person in the organization:				
First (or Given) Name ANNIE		Last (or Family) Name HODGINS		Title MS
Street Number 192	Street Name SPADINA AVENUE			Apt/Suite 427
City/Town TORONTO		Province ON	Postal Code M5T 2C2	Email ahodgins@housingrightscanada.com
Daytime Phone 416-944-0087	Cell Phone		Fax	TTY

What is the best way to send information to you? ☐ Mail ☒ Email ☐ Fax  
(If you check email, you are consenting to the delivery of documents by email.)

**A2. Representative Contact Information**

Complete this section only if you are authorizing a lawyer or other representative to act for you.

☒ I authorize the organization and/or person named below to represent me.

First (or Given) Name MARGARET FLYNN & PRINCESS DOE		Last (or Family) Name SEE <-	
Organization (if applicable) CANADIAN CENTRE FOR HOUSING RIGHTS		LSUC No. (if applicable) 522401-MF & 878580-PD	
Street Number 192	Street Name SPADINA AVENUE		Apt/Suite 427
City/Town TORONTO	Province ON	Postal Code M5T 2C2	Email ahodgins@housingrightscanada.com
Daytime Phone 416-944-0087	Cell Phone 416-995-6290	Fax	TTY

What is the best way to send information to your representative?   ☐ Mail   ☒ Email   ☐ Fax  
(If you check email, you are consenting to the delivery of documents by email.)

**Questions for the Proposed Intervenor (other than the Commission)**

The proposed Intervenor is required to answer the following questions.

**A3. Describe the issue(s) you want to address.**

See Schedule A.

**A4. Explain your interest in the issue(s) and explain your expertise, if any, regarding the issue(s).**

See Schedule A.

**A5. What is your position, if any, on each of the facts and issue(s) raised in the application and the response?**

See Schedule A.

**A6. What material facts will you rely on?**

CCHR can assist the Tribunal in the legal tests and frameworks that must be applied at the summary hearing stage, particularly in relation to individual claims in housing with a systemic discrimination component. CCHR will not rely on any facts beyond those pled by the parties.

**A7. What are the terms on which you seek to intervene?**

CCHR seeks leave to intervene with full rights of participation in the summary hearing on June 24, 2025, including the right to receive materials relating to the summary hearing, attend at and participate in the summary hearing, the opportunity to make oral submissions at the summary hearing, and the opportunity to file written submissions prior to the summary hearing. CCHR proposes that it provide written submissions no longer than 15 pages by June 3, 2025, or on another date as directed by the Tribunal.

**PLEASE GO TO PART C**

**Part B: For completion by the Commission****B1. Contact Information for the Commission**

Name of Contact Person					LSUC No. (if applicable)	
Street Number	Street Name				Apt/Suite	
City/Town		Province	Postal Code	Email		
Daytime Phone	Cell Phone		Fax		TTY	

What is the best way to send information to you? ☐ Mail ☐ Email ☐ Fax  
(If you check email, you are consenting to the delivery of documents by email.)

**B2. Provide a statement of issues that the Commission wants to address.**

**B3. Explain how the issues relate to the Commission's role, mandate and the public interest.**

**B4. What is the Commission's position, if any, on each of the facts and issues raised in the Application and Response?**

**B5. What are the material facts on which the Commission will rely?**

**B6. What remedy is the Commission seeking?**

**B7. What are terms on which the Commission seeks to intervene?**

**Part C: For completion by all Proposed Intervenors**

**C1. If you have documents that are important to the application, list them here. Copies do not need to be sent at this time.**

<b>Document name</b>	<b>Why the document is important to the application</b>
N/A	

**C2. If you believe the applicant and/or respondent(s) have documents that are important to the application, list them here.**

<b>Document name</b>	<b>Why the document is important to the application</b>	<b>Name of person who has it</b>
N/A		

**C3. If you believe another person or organization has documents that are important to the application, list them here. List only the most important.**

<b>Document name</b>	<b>Why the document is important to the application</b>	<b>Name of person who has it</b>
N/A		

## Signature

By signing my name, I declare that, to the best of my knowledge, the information that is found in this form is complete and accurate.

Name:

ANNIE HODGINS

Signature:

Date: (dd/mm/yyyy)

09/05/2025

☒ Please check this box if you are filing your request electronically. This represents your signature. You must fill in the date, above.

### Collection of Information:

Under the Ontario *Human Rights Code*, the Human Rights Tribunal of Ontario (HRTO) has the right to collect the personal information requested on this form. We use the information to resolve your application. After you file the form, your information may also be available to the public. If you have questions about how the HRTO uses your personal information, contact the HRTO at 416-326-1312 or 1-866-598-0322 (toll-free.)