

ONTARIO COURT OF JUSTICE

APPLICATION FOR CONSENT VARIATION OF BAIL

Section 519.1 Criminal Code (Use this form if you were released by a Court)

PART 1: APPLICANT/ACCUSED INFORMATION

Last Name*	First Name*
Quequish	Jonathon

Date of Birth (dd-mmm-yyyy)*	Occupation
12-Dec-1986	

Unit Number	Street Number	Street Name	PO Box
	15	Forrest Drive	

City/Town	Province/State	Postal/Zip Code
Sioux Lookout	Ontario	

Telephone Number	Email Address (if available)
(807) 621-6923 ext.	

Consent of the Crown is requested to change the Release Order as follows:*

(Please identify the part(s) of the Release Order you would like changed)

1) Add in an exception to the Curfew:

Except from 9am-5pm for work purposes with NAN legal, and for travel directly to and from work.

2) Add in a condition not to attend Lac Seul 1st Nation except for attending court.

The reasons for asking that the Release Order be changed are:*(
Please explain why you want the Release Order changed)

Client was on a leave of absence but will be resuming his employment.

I understand the current Release Order remains in effect and the order is not changed until I have been notified by the Court or my lawyer the request for variation has been granted.

Today's date (dd-mmm-yyyy)*

11-Jul-2024

Name of Accused

Last Name*

Quequish

First Name*

Jonathon

PART 2: SURETY CONSENT (if any sureties)

SURETY 1 INFORMATION

I consent to the above variation of the Release Order.

I DO NOT consent to the above variation of the Release Order.

Last Name		First Name	
Quequish		Myra	
Date of Birth (dd-mmm-yyyy)		Occupation	
31-Dec-1963			
Unit Number	Street Number	Street Name	PO Box
	148	Queen Street	
City/Town		Province/State	Postal/Zip Code
Sioux Lookout		Ontario	
Telephone Number		Email Address (if available)	
(807) 374-0485 ext.			

SURETY 2 INFORMATION

I consent to the above variation of the Release Order.

I DO NOT consent to the above variation of the Release Order.

Last Name		First Name	
Angeconeb		Amanda	
Date of Birth (dd-mmm-yyyy)		Occupation	
05-Nov-1989			
Unit Number	Street Number	Street Name	PO Box
	15	Forrest Drive	
City/Town		Province/State	Postal/Zip Code
Sioux Lookout		Ontario	
Telephone Number		Email Address (if available)	
(807) 738-2161 ext.			

PART 3: COUNSEL (if Represented)

- My client understands the current release order remains in effect and the order is not changed until they have been notified by the Court or myself that the request for variation has been accepted by the Crown and the Justice of the Peace or Provincial Court Judge.
- I completed the surety portion of the form and confirmed with the surety(ies) that they are aware of the variation and consent to the variation.

Last Name

Seib

First Name:

Aaron

Telephone Number

(204) 953-3695

ext.

Email Address (if available)

aseib@cgsjlaw.com

PART 4: PROSECUTOR

- I consent to the above variation
- I DO NOT consent to the above variation

Today's date (dd-mmm-yyyy)

11-Jul-2024

Name of Prosecutor

Last Name

Gill

First Name

Ryan

PART 5: Justice of the Peace / Provincial Court Judge

- The Release Order is varied on the above-noted terms.
- The application is dismissed, the Release Order is NOT varied.

Today's date (dd-mmm-yyyy)

July 12/2024

Signature of Justice of the Peace / Provincial Court Judge



T. Moss
Justice of the Peace
Juge de paix
Province of Ontario