**PRE-TRIAL FORM FOR DRINKING AND DRIVING CASES**

R. v. Click here to enter text.

INFORMATION #:Click here to enter text.

INCIDENT DATE: Click here to enter a date.

CHARGES:  OVER 80

IMPAIRED DRIVING

REFUSE ROADSIDE/INTOXILYZER

OTHER: \_Click here to enter text.

DATE MEETING HELD: Click here to enter a date.

CROWN: Click here to enter text. DEFENCE: Click here to enter text.

*CHARTER* ISSUES?  Yes  No

If yes:  s.7  s.8  s.9  s.10(b)  s. 11(b)  Other Click here to enter text.

If yes, when will Notice be served upon Crown? Click here to enter text.

WILL CROWN SEEK TO INTRODUCE ACCUSED’S STATEMENTS?

Yes  No

IF SO, WILL DEFENCE REQUIRE A *VOIR DIRE*?  Yes  No

NUMBER OF CROWN WITNESSES AT TRIAL: Choose an item.

NUMBER OF DEFENCE WITNESSES AT TRIAL: Choose an item.

WILL THE QUALIFIED TECHNICIAN BE CALLED Choose an item.

WILL A TOXICOLOGIST BE CALLED: BY CROWN  Yes  No

BY DEFENCE  Yes  No

IF SO, HAS THERE BEEN 657.3(3) COMPLIANCE?  Yes  No

ADMISSIONS:

Click here to enter text.

ANTICIPATED LENGTH OF TRIAL: Choose an item.

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Crown Counsel Counsel for person charged