

Day of Rest Order Application		
Contact Person:		
	Name	Phone number Email
Business Name:		
Business Address:		
	Street Number and Name	Box/Suite
	City	Province/State Postal Code/Zip
This is a:	New Order Amendment or Renewal to Order# _____ (insert order number)	
The Permit Affects:	Worksite Location (if different than above)	
	Type of Business	
	Who is Affected? (all employees, specific section, department, etc.)	
	Job Titles of Affected Employees	
	If any, how many of the affected employees are under the age of 16: _____	
	Employees are Represented by a Union: <input type="checkbox"/> Yes <input type="checkbox"/> No	
√ all that apply:	The business operates only part of the year Explain: _____ _____ _____	A weekly day of rest is an undue hardship to the business Explain: _____ _____ _____

	A weekly day of rest would cause severe loss to the business Explain: _____ _____ _____	A weekly day of rest does not benefit the employees because the location is remote Explain: _____ _____ _____
Schedule	Under this order the maximum number of days the employees will work in a row (without a rest day) is _____	Under this order the employees will get _____ days off in a row immediately following _____ consecutive days of work
	How many hours per day do the employees work? _____	How many hours per week do the employees work? _____

Time Period Requested for the permit (maximum – 3 years)	
_____	_____ (Day/Month/Year)
Start Date	End Date

Employer: I certify that all information contained in this application is true and correct. Should the request be approved, I agree to all conditions contained in the permit and all other applicable legislation.	
Name: _____ (print)	
Signature: _____	Date: _____

INTERNAL USE ONLY:	Permit #: _____
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This personal information is being collected under the authority of *The Employment Standards Code*. It is protected by the protection of privacy provisions of *The Freedom of Information and Protection of Privacy Act*. If you have any questions about this collection of information, please contact the Manager of Client Services, 604 - 401 York Ave. Wpg MB, (204) 945-3352 or 1-800-821-4307.