



BULLETIN

TRANSPORTATION DISTRICT 140
DISTRICT DES TRANSPORTS 140

International Association of Machinists and Aerospace Workers
Association internationale des machinistes et des travailleurs et travailleuses de l'aérospatiale

IMPORTANT INFORMATION FOR ALL FORMER AVEOS EMPLOYEES APPLICATION FOR THE WAGE EARNER PROTECTION PROGRAM (WEPP)

Dear Brothers and Sisters:

On November 22, 2013 the Companies Creditors' Arrangement Act (CCAA) process came to an end and Aveos was assigned into bankruptcy.

The bankruptcy of Aveos has triggered the application of the Wage Earner Protection Program Act.

This government program can pay up to \$3,397.34 (after deductions) of eligible wages owed to former Aveos Employees.

MNP Ltd. has been appointed as the bankruptcy Trustee of Aveos, and is in the process of mailing out a Notice of the Wage Earner Protection Program Act to former employees of Aveos. This Notice has also been posted to the Trustee's website at:

www.mnpdebt.ca/en/corporate/corporate-engagements/aveos-fleet-performance-inc

The Trustee's Notice of Wage Earner Protection Program advises that, in order to benefit from the WEPP, former Aveos employees must now submit a WEPP application to Service Canada within fifty-six (56) days from the date of bankruptcy, namely before January 17, 2014.

The WEPP, unfortunately, provides no legal mechanism for the Union to file applications on behalf of individual employees.

This means that each former Aveos employee must now file their own online application to access the money they are entitled to receive.

NEXT STEP IN THE PROCESS

Each former Aveos Employee MUST file an online WEPP application before January 17, 2014.

Applications for the WEPP are to be completed online. The on line WEPP application is on Service Canada's website, at the following internet address:

<http://www.servicecanada.gc.ca/eng/sc/wepp/apply/how.shtml>

If for any reason a former Aveos employee cannot file online, they should contact the Trustee or Service Canada at the numbers provided towards the end of this bulletin.

.../2

VISIT OUR WEBSITE / VISITEZ NOTRE PAGE WEB – <http://www.iam140.ca>

Halifax – Tel/Tél. : 902-481-0077 Fax/Télé.: 902-481-0079
Winnipeg – Tel/Tél. : 204-987-9254 Fax/Télé.: 204-987-9252
Calgary – Tel/Tél. : 403-250-3708 Fax/Télé.: 403-250-3707
Toronto – Tel/Tél. : 905-671-3192 (Toll free/Sans frais : 1-877-426-2948) Fax/Télé.: 905-671-2114 (Toll free/Sans frais : 1-866-298-0369)
Vancouver – Tel/Tél. : 604-448-0721 (Toll free/Sans frais : 1-877-426-3140) Fax/Télé.: 604-448-0710 (Toll free/Sans frais : 1-888-310-1688)
Montréal – Tel/Tél. : 514-336-3031 (Toll free/Sans frais : 1-888-992-1010) Fax/Télé.: 514-336-3039 (Toll free/Sans frais : 1-866-800-3039)

What Information Does a Member Need to Complete the Online Application?

Each former Aveos employee will need to have the following information to complete the online application form:

- Their Social Insurance Number.
- The Aveos' Bankruptcy/ Receivership number: **411813161**
- Their Personal Information (address etc.).
- The online application form will ask whether a proof of claim was filed with the bankruptcy trustee. Former Aveos employees should state "**Yes**" because a proof of claim has been filed in the CCAA Employee Claims Process on behalf of every Aveos unionized employee by the Monitor and the IAMAW and transferred by a Court order to the bankruptcy trustee.
- The Trustee's name and telephone number, as follows:
 - Trustee Name: **MNP Ltd.**
 - Trustee Telephone: **1-514-228-7870**
- Former Aveos employees will be asked whether they are applying for a WEPP payment within the 56 day period. If you complete your application before January 17, 2014 you should answer "**Yes**".
- Employer Name and Address:
Aveos Fleet Performance Inc.
7171, boul. de la Côte-Vertu
Montreal QC H4S 1Z3
- Last day you worked with the bankrupt employer.
- Date of employer's bankruptcy: **2013-11-22 (November 22, 2013)**.
- If you want to have your money direct deposited to a Canadian bank account you will need to have your bank information on hand (Name of Financial Institution, Branch Number, Institution Number and Account Number).
- A sample online application form is included at the end of this bulletin.

Still Have Questions?

You can visit Service Canada's website for further explanation of the WEPP program:

<http://www.servicecanada.gc.ca/eng/sc/wepp/index.shtml>

Service Canada also has a WEPP information service by phone at:

Toll-Free: 1-866-683-6516
TTY: 1-800-926-9105

Former Aveos employees can also contact the Aveos Trustee in Bankruptcy by email at aveos.employee@mnp.ca or by telephone at 1-855-667-3320 or 1-514-228-7870.

What Happens After You Apply?

The WEPP pays out up to a maximum of \$3,397.34 (after deductions) of eligible wages owed to you by Aveos.

The amount of the payment you will receive as a result of your application has been fixed through the Employee Claims Process that started on June 26, 2013 and was just completed under the CCAA

.../3

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BULLETIN
IMPORTANT INFORMATION FOR ALL FORMER AVEOS EMPLOYEES
APPLICATION FOR THE WAGE EARNER PROTECTION PROGRAM (WEPP)
NOVEMBER 27, 2013

proceedings. For the vast majority of the former Aveos employees their entitlement will be as set out on the letter sent to them by the Monitor in July 2013, or in a Notice of Disallowance or Revision that they received in October 2013 (as a result of a proof of claim filed on your own behalf). As set out in Bulletin 91 there is a group of approximately 160 Members who will receive more than set out their original Monitor letter, without filing an individual claim, as a result of the Union proof of claim filed on their behalf.

The government has advised that it will likely be at least two months before it is able to process applications and start issuing payments.

We will continue to keep you informed of further developments.

In Solidarity,



Fred Hospes
President and Directing General Chairperson
Transportation District 140, IAMAW

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Wage Earner Protection Program Application

You must have a valid Social Insurance Number (SIN) to apply to the WEPP. If there is an issue with your SIN please visit your closest Service Canada Centre with your original primary document (Birth Certificate, Certificate of Canadian Citizenship, Certificate of Registration of Birth Abroad, Certificate of Indian Status, Permanent Resident Card, Work Permit, etc. For more information visit www.servicecanada.gc.ca)

Special Instructions

1. All questions are mandatory unless indicated as "(Optional)" at the end of each question text
2. Please make sure to use the buttons provided on the page rather than the browser buttons to navigate this website. Using the browser buttons may cause undesirable results.
3. Selecting a link on the menu bar will close your session. Any information entered during this session will be lost.
4. Your session will time out after 20 hours.

Social Insurance Number:

XXXXXXXXXX

Bankruptcy/Receivership number (Estate ID):

Bankruptcy/Receivership number is a number of up to nine digits included on the information sent to you by the trustee/receiver appointed for your former employer.

411813161

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Wage Earner Protection Program Application

PART 1 - APPLICANT INFORMATION

Social Insurance Number:

Is this application being completed by a representative on behalf of a medically incapacitated or deceased applicant?

If yes, please complete the "Appointment of Representative form EMP5453", and contact 1-866-683-6516 to ensure the appropriate supporting forms and information are submitted.

Please select an option

Last Name:

Please ensure that the format of your name recorded here matches the format of your name on your SIN card.

First Name:

Middle Initial: (Optional)

Date of Birth:

Year: Month: Day:

Country of Residence:

Please select *Other* only if you reside outside of Canada or the USA.

Canada

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Wage Earner Protection Program Application

PART 1 - APPLICANT INFORMATION (continued)

Street Address:

Street 1:

Street 2: (Optional)

City:

Province: -- Please select a province/territory --

Postal Code:

Telephone Number: (xxx) xxxxxxx

() Ext: (Optional)

Alternate Telephone Number: (xxx) xxxxxxx (Optional)

() Ext: (Optional)

Is your mailing address different from your street address?

Please select an option

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Wage Earner Protection Program Application

PART 1 - APPLICANT INFORMATION (continued)

The proof of claim is necessary to process your WEPP application, but is also required should you wish to make a claim against the bankrupt or insolvent employer for wages, vacation pay, severance, termination pay and other employee entitlements that are above and beyond what can be paid under the WEPP.

Official language you wish to use for communication:

Please select an option

Have you filed a Proof of Claim with the trustee/receiver appointed in your employer's bankruptcy/receivership?

A proof of claim is a written statement filed in bankruptcy or receivership proceedings in which a creditor cites the reason a debtor owes the creditor money. The trustee or receiver appointed in your former employer's bankruptcy/receivership will assist you in filing a proof of claim if you have not already done so.

Yes

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Wage Earner Protection Program Application

PART 1 - APPLICANT INFORMATION (continued)

Corporate name of the Trustee/Receiver administering your employer's bankruptcy:

The trustee or receiver appointed for your former employer will send you information needed to complete this application.

MNP Ltd.

Trustee/Receiver Telephone Number: (xxx) xxxxxxxx

(514) 2287870 Ext: (Optional)

Are you applying for a WEPP payment within the 56 day period?

Applications must be submitted to Service Canada within 56 days of either the later of:

- the date of bankruptcy/receivership;
- the date that your employment ended due to termination, resignation, retirement or expiry of term; or
- the date on which the receiver terminated your employment.

Yes

If **No**, please provide an explanation for the delay (maximum of 300 characters):

Empty text area for explanation of delay.

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Wage Earner Protection Program Application

PART 2 - EMPLOYMENT INFORMATION

Bankruptcy/Receivership number (Estate ID): 411813161

Business Name of the bankrupt or insolvent employer:

Aveos Fleet Performance Inc.

Former address of this employer:

Street 1: 7171, boul. Cote-Vertu

Street 2: (Optional)

City: Montreal

Province: Quebec

Postal Code: H4S 1Z3

date modified: 2013-11-21

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Wage Earner Protection Program Application**PART 2 - EMPLOYMENT INFORMATION (continued)**

Date of your employer's bankruptcy or receivership (if known):

Bankruptcy (YYYYMMDD):

2013-11-22



Receivership (YYYYMMDD):

N/A



Date employment ended with the employer:

Year: [] : [] Month: [] Day: []

During the period for which wages are owed, did you have controlling interest in the business?

An individual has controlling interest in a business when he owns more than 40% of the voting shares in the company; or he owns a block of voting shares that is large enough that no other shareholder or coalition of shareholders can block a motion; or he owns enough shares in a company to control the company's policy.

Please select an option

During the period for which wages are owed, were you an officer or director of the business?

Please select an option

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Wage Earner Protection Program Application

PART 2 - EMPLOYMENT INFORMATION (continued)

During the period for which wages are owed, were you a manager whose responsibilities included making binding financial decisions impacting the business of the former employer; and/or making binding decisions with respect to the payment or the non payment of wages by the former employer?

Please select an option

During the period for which wages are owed, were you related to a person with controlling interest in the business, officer, director or manager of the employer, by blood, marriage (including common-law) or adoption?

Applicants who are not at arm's length from those named above generally are not eligible for the WEPP; however, if you wish to prove that you should be eligible in spite of this relationship, please complete WEPP Supplementary Form - Additional Information Regarding Your Relationship To Your Employer (EMP 5433) and send it to:

WEPP Processing Centre
P.O. Box 5900
Cornwall, Ontario
K6H 6S2.

Please select an option

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Wage Earner Protection Program Application

PART 3 - SUBROGATION

I understand that upon my receipt of a payment under the WEPP, Her Majesty the Queen in right of Canada is subrogated, pursuant to s. 36 of the *WEPP Act* to any rights that I may have against my former employer or a director of that employer for the unpaid wages that are covered by the WEPP payment that I receive. I understand that my right to recover debts against my former employer, or a director of that employer, is limited to any amount of unpaid wages that I may be owed by my former employer, or a director of that employer, above and beyond the amount of payment I receive under the WEPP. In the event that I receive any amount from my former employer, director of that employer, the Trustee, or any third party for unpaid wages after receiving a payment under the WEPP, I hereby agree to remit to Her Majesty the Queen in right of Canada that amount to the extent of the amount I will have received under the WEPP.

If you agree with the above statement, please select **Yes** and click **Continue**.

If you wish to end your application, please click **Exit**.

Under the WEPP program, the Government of Canada will pay a portion of the individual's unpaid wages and in turn will take the employee's place as a creditor for that debt.

Yes

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Wage Earner Protection Program Application

Would you like Direct Deposit? (available for Canadian Financial institutions only)

Please select an option

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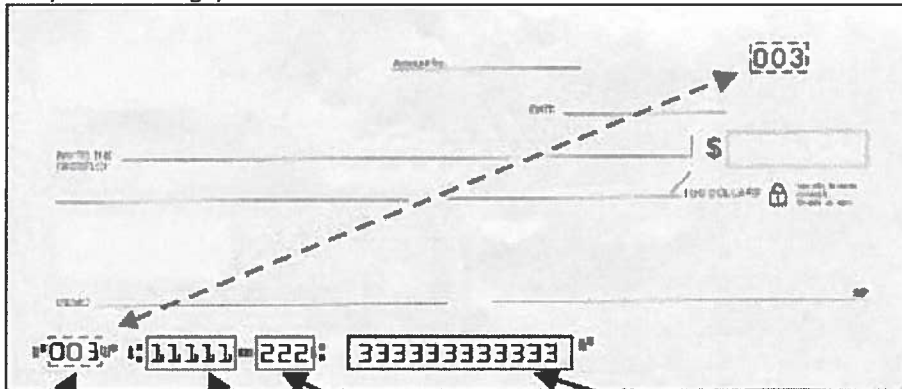


Wage Earner Protection Program Application

PART 4 - DIRECT DEPOSIT

In order to have your WEPP payment directly deposited in your bank account you will need the name of your financial institution as well as the branch number, the financial institution number, and your account number.

You can find these numbers in your passbook, on your bank statement, encoded deposit slip or cheque, or by contacting your financial institution in Canada.



Cheque number
(do not enter
this number)

Branch Number

Financial Institution

Account Number

Note: If you have authorized direct deposit and your bank account information changes or if you move, it is important that you let us know as soon as possible by calling or visiting a Service Canada Centre. **If you do not provide the information requested below, a cheque will be mailed to the address you indicated on this Application Form.**

Your WEPP payment will be deposited into your account at your financial institution if you are found eligible. Please provide the following information:

Name of Financial Institution:

Branch Number:

Institution Number:

Account Number:

Telephone number of Financial Institution: (xxx) xxxxxxx () Ext: (Optional)

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Wage Earner Protection Program Application

PART 5 - DECLARATION

I declare that the information provided on this application is complete and true to the best of my knowledge. I understand that this information will be used to determine my eligibility for the WEPP payments. I am aware that this information may be subject to verification and that making a representation that I know to be false or misleading, or making a declaration that I know to be false or misleading because of the non-disclosure of facts is an offence under the WEPP Act.

The personal information you provide in this application form, including your Social Insurance Number is collected under the authority of the WEPP Act and protected under the Privacy Act, WEPP Act, and the Department of Human Resources and Skills Development Act and in accordance with Treasury Board's Policy on Privacy and Data Protection regarding the use of the SIN. Participation is voluntary; however, refusal to provide the personal information could result in not being considered for payment under the WEPP.

The personal information you provide will be used by the Department of Human Resources and Skills Development (Service Canada) to administer the WEPP. As part of the administration of the WEPP, the personal information you provide may be used for policy analysis, research, evaluation or audit purposes, for which various sources of information under the custody and control of HRSDC may be linked. The personal information you provide may be linked to information provided to the Department of Human Resources and Skills Development (Service Canada) by the bankruptcy trustee/receiver to determine your eligibility for a WEPP payment.

In order to administer the WEPP and as permitted by law, the personal information collected on this form, as well as the amount of the WEPP payment you receive, may be disclosed to the bankruptcy trustee/receiver, other federal government institutions, and the province/territory where you were employed.

The use, retention, and disclosure of personal information collected on this form are described in the Personal Information Bank number HRSDC PPU 035. Under the Privacy Act, you have various rights regarding the personal information you provide to Service Canada, including the right to the protection of and access to your personal information. Instructions to access your personal information are outlined in the publication Info Source. You can get a copy of Info Source at any Service Canada Centre or at <http://infosource.gc.ca>.

If you agree with the above statement, please **select Yes and click Continue**.

If you wish to end your application, please click **Exit**.

Yes

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