



REQUEST FOR BIOGRAPHICAL INFORMATION

Opportunity for arbitrators to be selected for the Canadian Transportation Agency rosters

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Contact Information

Please note that completion of this form is lengthy. You may be required to save and return to complete. If you have any questions or need help please contact Martina Faith at Martina.Faith@otc-cta.gc.ca

Date of this version	October 11, 2018
First name	David
Last name	Towers
Middle initial	
Honorifics	
Professional title	CPA, CA
Firm name	David Towers Chartered Accountant
Address line 1	126, 1000 Glenhaven Way
Address line 2	
City	Cochrane
Province	Alberta
Postal code	T4C 1Y9
Secondary address (please indicate street, city, province and postal code)	
Telephone (office)	403-709-0280
Telephone (mobile)	403-438-3930
Telephone (other)	
Fax	
E-mail	davidtowers@shaw.ca
Web site URL	
LinkedIn URL	
Facebook	
Other social media links	
Region of residence	



Willingness to travel within and to other provinces? Please specify provinces.	<input checked="" type="checkbox"/> All provinces <input type="checkbox"/> British Columbia <input type="checkbox"/> Alberta <input type="checkbox"/> Saskatchewan <input type="checkbox"/> Manitoba <input type="checkbox"/> Ontario <input type="checkbox"/> Quebec <input type="checkbox"/> New Brunswick <input type="checkbox"/> Nova Scotia <input type="checkbox"/> Newfoundland and Labrador <input type="checkbox"/> Prince Edward Island <input type="checkbox"/> Yukon <input type="checkbox"/> Northwest Territories <input type="checkbox"/> Nunavut
Languages spoken	<input checked="" type="checkbox"/> English <input type="checkbox"/> French

Education

Please list degree(s), institution(s) attended and year degree(s) conferred below.

Degree	Institution attended	Year degree conferred
Business Diploma	Thomas Danby College, Leeds, England	1969

Please list courses or degrees in **Economics**, if any.

Courses	Institution attended	Year
Part of Business Diploma	As above	

Please list courses or degrees in **Finance and Accounting**, if any.

Courses	Institution attended	Year
Chartered Accountant designation	Institute of Chartered Accountants England & Wales	1971-1975
Chartered Accountant designation	Canadian Institute of Chartered Accountants	1983-1984



Canadian Insolvency & Restructuring Professional	Canadian Association of Insolvency & Restructuring Professionals	1989
Trustee in Bankruptcy	Industry Canada	1992

Please list courses relating to **logistics, transportation or transportation law**, if any.

Courses	Institution attended	Year
None		

Arbitration Designation

Please list below the designation(s), certification(s) or accreditation(s) in arbitration received from any recognized institution(s) and the year(s) conferred.

Designation	Organization	Year conferred
Chartered Arbitrator	Alternative Dispute Resolution Institute of Canada	2011

Arbitration Training

Please list below the **arbitration training** or course(s), if any, along with the institution providing the training and the year that you received this training.

Course	Institutions	Year
Introduction to Arbitration	Alternative Dispute Resolution Institute of Alberta (ADRIA)	2007
Arbitration I	ADRIA	2009
Arbitration II	ADRIA	2009
Mediation/Arbitration	ADRIA	2010
Arbitration III	ADRIA	2011
Mediation Theory and Skills Level I	ADRIA	2007
Mediation Theory and Skills Level II	ADRIA	2009
Civil Court Procedure	ADRIA	2011
Shifting from Positions to Interest	ADRIA	2011



Resolving Interpersonal Conflict	ADRIA	2011
Mediation Case Development	ADRIA	2011

Commercial Litigation Experience

Please specify approximate number of commercial cases in which you have acted as counsel.

Not a lawyer

Please list range of years over which these cases occurred.

Please list law firms with which you were associated, according to years.

Firm name	Duration
Not a lawyer	

Did you typically represent plaintiff, respondent or both? Please provide your answer as a percentage.	Response
Plaintiff	N/A
Respondent	N/A

Please list by subject area, the three most complex commercial cases with which you have been involved as counsel in arbitrations or litigation, the kind of evidence presented, what experts were involved, quantum in issue and duration of case.

Area of commercial litigation (e.g. patent infringement)	Kind of evidence presented	What type of experts were involved	Quantum (value of claim)	Duration (time in court)
Not counsel				

Experience as an Arbitrator, Adjudicator or Judge

Please specify approximate number of cases in which you have acted as an arbitrator, judge or tribunal adjudicator. Please note that there are cells, in the table below, in which you are asked to provide the court level and tribunal.



	Arbitrator	Judge	Tribunal Adjudicator
Number of cases	22		
Over what period of years	14		
Number of commercial cases	3		
Over what period of years	14		
Level of court			
Please specify tribunal			

Please list by subject area the three most complex commercial cases in which you acted as arbitrator, judge or adjudicator, the kind of evidence presented, experts involved, quantum in issue and duration of hearing.

Please specify your role	Area of commercial litigation	Evidence presented	Experts included	Quantum (value of claim)	Duration (time in court)
Arbitrator	Business Interruption Insurance	Claim by insured and rebuttal by expert	One Forensic Accountant for each side	\$1.5 million	1 day
Arbitrator leading review team	Oil & Gas Contract Pricing Dispute	Calculations by contracting parties	Representatives from each party submitted written arguments and calculations	\$3 to \$4 million	None
Arbitrator	Business Interruption Insurance	Claim by insured and rebuttal by expert	One Forensic Accountant for each side	\$300,000	1 day

Work Samples

Please provide a written award (redacted) or decision that you have written. Files should be attached to this submission. Only .pdf or .doc files are accepted.



Transportation Specific Legislation

FOR RAIL SPECIALIZATION – LEGISLATION, REGULATIONS, AND PROCEDURES

Please rate your current familiarity with the following using "Very familiar", "Fair" or "Not familiar".	Response
<i>Railway Costing Regulations – SOR/80-310</i>	Not familiar
<i>Railway Third Party Liability Insurance Coverage Regulations – SOR/96-337</i>	Not familiar
<i>Railway Traffic Liability Regulations – SOR/91-488</i>	Not familiar
<i>Carriers and Transportation and Grain Handling Undertakings Information Regulations – SOR/96-334</i>	Not familiar
<i>Railway Interswitching Regulations – SOR/88-41</i>	Not familiar

Please provide details explaining how you became familiar with this material.

I have no current familiarity with listed legislation

FOR MARINE SPECIALIZATION – LEGISLATION, REGULATIONS, AND PROCEDURES

Please rate your current familiarity with the following using "Very familiar", "Fair" or "Not familiar":	Response
<i>Canada Marine Act – S.C. 1998, c. 10</i>	Not familiar
<i>Coasting Trade Act – S.C. 1992, c. 31</i>	Not familiar
<i>Pilotage Act – R.S.C. 1985, c. P-14</i>	Not familiar
<i>Shipping Conferences Exemption Act, 1987 – R.S.C., 1985, c. 17 (3rd Supp.)</i>	Not familiar

Please provide details explaining how you became familiar with this material.

I have no current familiarity with listed legislation

FOR AIR SPECIALIZATION – LEGISLATION, REGULATIONS, AND PROCEDURES

Please rate your current familiarity with the following using "Very familiar", "Fair" or "Not familiar":	Response
<i>Air Transportation Regulations – SOR/88-58</i>	Not familiar

Please provide details explaining how you became familiar with this material.

I have no current familiarity with listed legislation



Familiarity with Transportation and Transportation Law

Please describe your background involvement in the transportation industry or transportation law, if any.

Worked as Trustee in Bankruptcy and Receiver-Manager for a number of trucking companies. No other experience.

Disclosure

If you have ever worked for, been associated with, or have a current or past interest in a transportation carrier or shipper in rail, marine or air, please provide details below:

Not applicable

Conflict

If you OR YOUR FIRM currently represent, or have in the past represented, a carrier please advise.

Not applicable

If you OR YOUR FIRM currently represent, or have ever represented, a company in a matter relating to shipment of goods, please advise.

Not applicable

Fees

Please provide daily and hourly rates	Response
Daily	\$3000.00
Hourly	\$400.00

Availability

How many months in advance are you booked for?

Up to one month

Signed Agreement

PLEASE NOTE THAT YOUR APPLICATION IS NOT COMPLETE WITHOUT PROOF OF INSURANCE AND THE SIGNED AGREEMENT THAT YOU WILL FIND BELOW.

The information I have provided describes accurately my qualifications and experience.

I understand that:



- Roster members will be selected based on the criteria set out in this request for biographical information.
- The biographical information provided by me in this request for biographical information will appear online ON the Agency's Web site.
- Rosters and roster members may be reviewed every two years.
- Being accepted as a roster member does not guarantee that I will receive work under the *Canada Transportation Act*.
- The Canada Transportation Agency is in no way responsible for any fees, expenses or outstanding payments, all of which shall be billed by the arbitrator to the parties to any proceeding under the *Canada Transportation Act*.

If my request is accepted, I will comply with all the conditions of the program, including but not limited to the following:

- Compliance with the Canadian Transportation Agency's Code of Values and Ethics.
- Maintenance of insurance at the required level.

Please provide proof of insurance	Response
Policy number #	TPL1006618
Issuer	Trisura Guarantee Insurance Company

Signed on	
in the province of	
Signature (Please sign the form digitally by typing your first and last name.)	* Signed on original copy

Application Checklist

Please do not include a resume. If you have any questions or need help, please contact Martina Faith at Martina.Faith@otc-cta.gc.ca.

If you wish to be considered for the roster, please ensure that you completed the following:



Checklist

- Filled out the Application Form
- Provided your work sample
- Provided your digital signature above
- Faxed us (819-953-6613) or attached as a PDF, the proof of insurance