

ANNEX 2 (MODIFIED)
(Judgment of March 4, 2024)
ONLINE CLAIM FORM
DISTRIBUTION OF CLASS ACTION COMPENSATIONS
Turenne v. FTQ Construction : 500-06-000586-111
Carrier v. CPQMC (Inter) : 500-06-001096-201

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| Claim period ending on April 15, 2026 |
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You may be entitled to a substantial compensation, less deductions of up to 35% (plus taxes) for group attorneys' fees and the *Fond d'aide aux actions collectives*, if you were a construction business and meet the following conditions:

- You were a **construction contractor** with fewer than 50 employees in October 2011;
- Your business address was located in the province of Quebec;
- On October 25, 2011, one of your working site on was closed due to the strike;
- You incurred financial losses on October 25, 2011 (hours paid without compensation for work, loss of profits incurred and additional costs) due to the closure of your construction site(s).

IMPORTANT NOTICE REGARDING THE CLAIM FORM

Completing this form does not guarantee you will receive compensation, as its compliance must be verified by the claims administrator.

Your claim may be filed in the Court record in any manner the Court may authorize.

INSTRUCTIONS FOR COMPLETING THE FORM

1. You must fill in all fields to submit your form:
2. Personal information about the account holder is mandatory:
3. Complete this claim form at the latest **April 15, 2026**.

CONSTRUCTION CONTRACTOR: CLAIM INFORMATION

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| Business Name: | |
| CCQ Employer Number: | |
| First name of authorized representative: | |
| Last name of authorized representative: | |
| Email address of authorized representative: | |
| Phone number of authorized representative: | |
| Address of the business in 2011 : | |
| City: | |
| Province: | |
| Postal Code: | |
| Current address of the business: | |
| City: | |
| Province: | |
| Postal Code: | |
| Did your company have less than 50 employees on October 25, 2011? | |
| If so, on how many working site? | |
| How many of your construction sites were closed on October 25, 2011 due to the strike? | |

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| Did you suffer any losses due to this or these closures? | |
| Ventilation of the damages: | |
| 1) Paid working hours without the provision of work by employees | |
| Number of employees: | |
| Total amount of paid hours per employee: | |
| 2) Loss of income/late payment penalty (proof of payment and copy(ies) of contract(s) in support (if you have them)) | |
| Total loss of income/late payment penalty: | |
| 3) Daily loss for equipment rental costs | |
| Total equipment rental cost: | |
| Description of the rented equipment: | |

PAYMENT OPTION (If your claim is accepted)

- INTERAC TRANSFER** (online Interac payment at the end of the claim period)
- CHECK** (payment by mail at the end of the claim period)
- I consent to the disclosure of personal information in the possession of the Commission de la construction du Québec (CCQ) in order to allow the verification of my Claim