### THE HUMAN RIGHTS REVIEW TRIBUNAL

### **Statement of Claim**





Office use only: HRRT No

#### When to use this form

Use this form if you have a claim under section 98 of the Privacy Act 2020 or under the Privacy Act 1993.

### **Completing this form**

- Print clearly in CAPITALS. Use a black pen or blue pen when completing this form.
- Please file four physical copies of this Statement of Claim, by posting or by handing them in to the Secretary of the Tribunal at the address shown at the end of this form. If you are filing this claim against two or more defendants, you must add an extra copy for each additional defendant. For example: 1 defendant = 1 original + 3 copies; 2 defendants = 1 original + 4 copies; and so on.
- Answer every question on the form unless the instructions tell you otherwise.

# Step 1. Plaintiff(s) (please provide your details)

If there is more than one plaintiff, fill out one section for each plaintiff. If you need additional space, please attach a separate sheet of paper.

If you are using a representative (a lawyer or an authorised person acting on your behalf), please give their details too. If your representative is not a lawyer, you need to give him or her the authority to act on your behalf.

First plaintiff			
Name First		Middle	Surname
			Camanic
Phone/mobile number  Preferred contact option for this application. Please choose one and give the details.			
Email	Postal address		
Email address _			
Postal address	Street		
	Suburb		City
	State (if outside NZ)		Post code
	Country		

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# Yes. No. In what language? \_\_\_\_\_ Do you have a representative (a lawyer or an authorised person acting on your behalf)? Yes. No. Then proceed to Step 2 If yes, please fill in the details below. Tick the relevant box: My representative is my lawyer. My representative is a non-lawyer and I give my authorisation for this person (named below) to act on my behalf against the defendant. Name and signature (first plaintiff) Date Name of lawyer or authorised representative Name of company (if applicable) Phone/mobile number \_\_\_\_\_ Email address \_\_ Postal address Street Suburb Citv State (if outside NZ) Post code Country I agree to accept all notices and other communications relating to this application on behalf of the plaintiffs. Representative's signature Date

Do you require an interpreter during the hearing?

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# Second plaintiff (if applicable)

me First	Middle	Surname
none/mobile		
		ease choose one and give the details.
		g
Email	Postal address	
mail address		
ostal address		
	Street	
	Suburb	City
	State (if outside NZ)	Post code
	Country	
o vou roquire	an interpreter during the hearing	•
o you require		<b>?</b>
Yes.		No.
Yes.	language?	
Yes. In what	language?	No.
Yes. In what	language?	
Yes. In what o you have a Yes.	language? representative (a lawyer or an aut	No. thorised person acting on your behalf)?
Yes. In what o you have a Yes.	language?	No. thorised person acting on your behalf)?
Yes. In what o you have a Yes. yes, please fil	language? representative (a lawyer or an aut	No. thorised person acting on your behalf)?
Yes. In what  Oo you have a  Yes.  If yes, please file  Tick the relevant	language? representative (a lawyer or an aut	No. thorised person acting on your behalf)?
Yes. In what  Do you have a  Yes.  If yes, please file  Wy representation  My representation  My representation	representative (a lawyer or an aut  I in the details below.  It box:  esentative is my lawyer.	No. thorised person acting on your behalf)?
Yes. In what  Do you have a  Yes.  If yes, please fil  My representation on my b	representative (a lawyer or an aut  I in the details below.  It box: esentative is my lawyer. esentative is a non-lawyer and I give ehalf against the defendant.	thorised person acting on your behalf)?  No. Then please go to Step 2  e my authorisation for this person (named below) to act
Yes. In what  Do you have a  Yes.  If yes, please fil  My representation my be	representative (a lawyer or an aut  I in the details below.  It box:  esentative is my lawyer.  esentative is a non-lawyer and I give	thorised person acting on your behalf)?  No. Then please go to Step 2

Phone/mobile n	umber		
Email address			
Postal address	Street		
	Suburb		City
	State (if outside NZ)		Post code
	Country		
I agree to a	accept all notices and other co	ommunications relating to	this application on behalf of the plaintiffs.
Representative	's signature		Date
First Phone/mobile n	umber		Surname
Email address			
Postal address	Street		
	Suburb		City
	State (if outside NZ)		Post code
	Country		_
If there is more tha	an one defendant, please provide	e the details in a separate sh	neet of paper and attach to this form.

# Step 3. Relevant provisions of the Privacy Act

Specify the information privacy principles (IPPs) or other provisions of the Privacy Act 2020 or of the Privacy Act 1993 or of the Code of Practice which you consider to have been breached.

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Please tick the boxes that apply to you (refer to the relevant Certificate or notice given by the Privacy Commissioner or [if applicable] refer to the notice given by the Director of Human Rights Proceedings):
The Privacy Commissioner issued a Certificate of Investigation in relation to the investigation of a complaint under the Privacy Act 1993 or the Director declined to bring proceedings under the Privacy Act 1993; (if this applies then tick this box and move to step 4)
The Privacy Commissioner has decided, under section 77(2)(a) of the Privacy Act 2020, not to investigate the complaint; or
The Privacy Commissioner, having commenced an investigation, has decided not to further investigate the complaint or matter; or
The Privacy Commissioner has not made a determination under section 91(2), 93(2), or 94(1) of the Privacy Act 2020 in respect of the complaint or matter; or

The Privacy Commissioner has determined that the complaint does not have substance, or that the matter should not be proceeded with; or

The Privacy Commissioner has determined that the complaint has substance, or that the matter should be proceeded with, but has not referred the complaint or matter to the Director of Human Rights Proceedings; or

The Privacy Commissioner has made an access direction under section 92 of the Privacy act 2020, but the plaintiff is not satisfied with terms of the access direction; or

The Privacy Commissioner has made an access direction under section 92, but the plaintiff seeks 1 or more remedies under section 102 of the Privacy Act 2020 (whether or not the plaintiff is satisfied with the terms of the access direction); or

The Director has decided not to commence proceedings in respect of the complaint or matter referred to the Director by the Privacy Commissioner; or

The Director has notified the plaintiff/s that the Director has agreed to the plaintiff/s commencing proceedings in respect of the complaint or matter referred to the Director by the Commissioner.

### Step 4. Facts of the case

Date of the section 98 notice issued either by the

Please attach a copy of the:

- Certificate of Investigation issued by the Privacy Commissioner under the Privacy Act 1993; or
- Section 98 notice issued by the Privacy Commissioner under the Privacy Act 2020; or
- Notice issued by the Director of Human Rights Proceedings under the Privacy Act 2020.

Please also attach a copy of any Certificate issued by the Privacy Commissioner under the Privacy Act 2020 (if applicable).

Privacy Commissioner or by the Director of Human Rights Proceedings (if applicable)	/	′	(day/month/year) 
State briefly and clearly the facts giving rise to your clair	m such as:		
<ul> <li>When (date and time) did this happen?</li> <li>Where did this happen?</li> <li>Who was involved?</li> <li>What consequences have there been for you as a re</li> </ul> Please state each allegation in a separate numbered paragraph.	esult the defend	dant's interfere	nce with your privacy?
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Please describe the effect of the breach on you.	
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whether the access direction has been appealed by the defendant, or whether you have asked the Tribunal to enforce access direction.	the
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If you need additional space, please attach a separate sheet of paper.	
Step 5. What order(s) do you want the Tribunal to make?	
With reference to sections 102 and 103 of the Privacy Act 2020, please state the orders that you want the Tribunal to make. If you are claiming a sum of money, specify the amount and show how this amount has barrived at. If you need additional space, please attach a separate sheet of paper.	oeen
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If your claim relates to an access complaint, and the Privacy Commissioner has issued an access direction, please include

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3	
If your claim relates to an access complaint, and the Privacy Commissioner has iss you are satisfied with the access direction in whole or in part. If you are not satisfied why and what order you would like the Tribunal to make.	
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3.	
Name and signature (first plaintiff)	Date
. Tame and orginator (mot plantin)	
Name and signature (second plaintiff)	Date

## Step 6. Do a quick check

#### Before sending in this form - check:

You have answered every question

You have signed and dated this form



You have attached a copy of the section 98 notice issued by the Privacy Commissioner or by the Director of Human Rights Proceedings under the Privacy Act 2020

AND



You have attached a copy of the Certificate issued by the Privacy Commissioner under the Privacy Act 2020

OR



You have attached a copy of the Certificate of Investigation issued by the Privacy Commissioner under the Privacy Act 1993



You have attached multiple copies of the form (as per the instruction at the beginning of this form)

## Step 7. Send in this form

Please hand in the completed form and additional copies to the Secretary at the address below or post to:

The Secretary
The Human Rights Review Tribunal
Tribunals Unit
Ministry of Justice
SX 11159, Wellington
Level 1, 86 Customhouse Quay, Wellington 6011

If you need more help filling in this form, please call (04) 462 6660 or email hrrt@justice.govt.nz

or visit www.justice.govt.nz/hrrt