

Review Authority

For more information visit www.justice.govt.nz/tribunals/ra

Application for Review

(Legal Services Act 2011)

What is this form for?

Use this form if you want to apply to the Review Authority (the Authority) for a review of the Secretary for Justice's decision relating to your status as a legal aid provider or legal services provider.

Who can apply for a review?

You may apply for a review if you are:

- A person who has applied to be a provider of legal aid services or specified legal services; or
- A person who is a provider of legal aid services or specified legal services.

A representative may complete this application provided the representative has written authority from you to act on your behalf in this matter.

How to complete this form

- Please use CAPITAL LETTERS if filling out by hand.
- You must answer every question on the form unless the instructions tell you otherwise.
- You must provide a copy of the Secretary for Justice's decision that you want the Review Authority to review.
- You **must** attach a copy of all relevant documents • in support of your application (eg, certificates, correspondence, or any reports).
 - Documents which you did not submit to the Secretary for Justice at the time of the decision will not be considered in a review of that decision.
- All documents must be in English.

What can the Review Authority review? The Review Authority can review the Secretary for Justice's decision:

- Declining your application for approval to provide one or more legal aid services or specified legal services.
- Imposing any condition on your approval to provide one or more legal aid services or specified legal services.
- Imposing any interim restriction on your approval to provide legal aid services or specified legal services.
- Imposing any sanction after an investigation by the Performance Review Committee.
- Cancelling your approval to provide legal aid services or specified legal services.

5 What is the timeframe for lodging an application for review to the Review Authority? The Review Authority must receive your application for review within 20 working days from the date notice of the Secretary for Justice's decision was given to you. If exceptional circumstances prevented you from lodging

your application within 20 working days, the Review Authority may accept a late application no later than three months after the date on which notice of the decision was given to you.

6 Are there any fees for lodging an application for review to the Review Authority? There are no fees for lodging an application for review to the Authority.

How to apply for a review

To lodge an application for review you can either:

- · Complete the application form online; or
- · Complete this form and forward together with your supporting documents to the Review Authority by email, fax, or post. Contact details are at the end of this form.

8 What happens next?

If your application can be accepted, the Review Authority will send a copy of your application to the Secretary for Justice. The Authority may seek additional information in order to carry out the review.

For more information on what happens to a review go to www.justice.govt.nz/tribunals/ra

Form 1

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Review Authority

For more information visit www.justice.govt.nz/tribunals/ra

Application for Review

(Legal Services Act 2011)

OFFICE USE ONLY RA Case Number_

Form 1

Part 1: Applicant's information

1A. What is your full name?

Last name(s)

First name(s)

Organisation/Firm

1B. What is your home address? (This cannot be a PO Box)

If you have a representative, notices, documents and other communication will be sent to them on your behalf, if your representative agrees.

| Street number / Street name | | | |
|-----------------------------|----------------------------|-----------------------------------|-----------------|
| Suburb | - | Town / City | Post code |
| Do you also agree to reco | eive notices, documents, a | nd other communication by email?(| Please tick 🗹) |
| Yes Email a | ddress | | |
| No | | | |
| IC. Other contact de | tails | | |
| Daytime contact phone n | umber () | Mobile number (|) |

| Part 2: Representative's information (if the provider is represented) | | | |
|---|------------------------------------|-----------|--|
| 2A. What is your full nam | ne? | | |
| Last name(s) | | | |
| First name(s) | First name(s) | | |
| Organisation/Firm | Organisation/Firm | | |
| 2B. What is your postal a | ddress? (PO Box or street address) | | |
| Street number / Street name | | | |
| Suburb | Town / City | Post code | |
| PO Box | | | |
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| Part 2: Representative's information (if the provider is represented) (continued) |
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| 2C. Other contact details |
| Daytime contact phone number () Mobile number () |
| Do you also agree to receive notices, documents, and other communication by email? (Please tick) Yes Email address No |
| 2D. Important Information for Representatives: If you act for the Applicant without written authority, the Review Authority will inform the Secretary for Justice, which may affect your provider status. It may also make a complaint to the New Zealand Law Society. You must inform the Review Authority immediately if you cease to represent the Applicant in matters related to this application. |
| (Please tick $$ the boxes that apply) |
| I declare that I have written authority to act on behalf of the Applicant. I understand that I or the Applicant may be requested to provide proof of such authority. |
| I agree to accept all notices and other communication relating to this application, on behalf of the Applicant. |
| |
| Part 3: Application to extend time for review 3A. Please tick 🗹 the box which applies to you |
| I am lodging my application with the Review Authority within 20 working days after notice of the Secretary for Justice's decision was given to me. |
| I am asking the Review Authority to consider a late application from me because of the following exceptional circumstances : Please give your reason(s) below and attach any supporting documents (eg, medical certificate). |
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| Continue on a separate sheet of paper if necessary and attach it to this form. |
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| Part 4: Application details |
| What is your Ministry of Justice application number? |
| Date of the decision you want reviewed (day/month/year) / / |
| Date you received the decision (day/month/year) / / |

| If you are asking the Review Authority to review a decision on more than one legal aid service or legal service, complete a separate section for | Part 4: Application | Part 4: Application details (continued) | | | |
|--|--|---|--|--|--|
| Criminal 1 Family Mental Health Criminal 2 Civil Maori Land Court/Appellate Court/Waitangi Tribunal Criminal 3 Immigration/Refugee Duty Solicitor Criminal 4 Court of Appeal/Supreme Court Police Detention Legal Assistance I am asking the Authority to review the Secretary for Justice's decision: (Please tick)) Declining my application for approval to provide one or more legal aid services or specified legal services.) Imposing conditions on my approval to provide one or more legal aid services or specified legal services.) Imposing interim restrictions under s101 of the Legal Services Act.) Cancelling my approval to provide one or more legal aid services or specified legal services.) Because: (please explain your grounds for a review) | 4A. Which part or parts of the Secretary for Justice's decision do you want the Authority to review? If you are asking the Review Authority to review a decision on more than one legal aid service or legal service, complete a separate section for each legal aid service or legal service. | | | | |
| Criminal 2 Civil Maori Land Court/Appellate Court/Waitangi Tribunal Criminal 3 Immigration/Refugee Duty Solicitor Criminal 4 Court of Appeal/Supreme Court Police Detention Legal Assistance I am asking the Authority to review the Secretary for Justice's decision: (Please tick)) Court of Appeal/Supreme Court Police Detention Legal Assistance I am asking the Authority to review the Secretary for Justice's decision: (Please tick)) Court of Appeal/Supreme Court Police Detention Legal Assistance I am asking the Authority to review the Secretary for Justice's decision: (Please tick)) Declining my application for approval to provide one or more legal aid services or specified legal services.) Imposing conditions on my approval to provide one or more legal aid services or specified legal services.) Imposing sanctions under s102 of the Legal Services Act.) Cancelling my approval to provide one or more legal aid services or specified legal services.) Decuse: (please explain your grounds for a review) | a. The legal aid serv | vice or legal service that relates to th | e decision being reviewed is: (Please tick $\overline{\checkmark}$) | | |
| Criminal 3 Immigration/Refugee Dury Solicitor Criminal 4 Court of Appeal/Supreme Court Police Detention Legal Assistance I am asking the Authority to review the Secretary for Justice's decision: (Please tick) | Criminal 1 | Family | Mental Health | | |
| Criminal 4 Court of Appeal/Supreme Court Police Detention Legal Assistance A masking the Authority to review the Secretary for Justice's decision: (Please tick) Declining my application for approval to provide one or more legal aid services or specified legal services. Imposing conditions under s101 of the Legal Services Act. Cancelling my approval to provide one or more legal aid services or specified legal services. because: (please explain your grounds for a review) Cancelling my approval to provide one or more legal aid services or specified legal services. because: (please explain your grounds for a review) | Criminal 2 | Civil | Maori Land Court/Appellate Court/Waitangi Tribunal | | |
| I am asking the Authority to review the Secretary for Justice's decision: (Please tick ☑) □ beclining my application for approval to provide one or more legal aid services or specified legal services. □ Imposing conditions on my approval to provide one or more legal aid services or specified legal services. □ Imposing interim restrictions under s101 of the Legal Services Act. □ Imposing sanctions under s102 of the Legal Services Act. □ Cancelling my approval to provide one or more legal aid services or specified legal services. because: (please explain your grounds for a review) | Criminal 3 | Immigration/Refugee | Duty Solicitor | | |
| Declining my application for approval to provide one or more legal aid services or specified legal services. Imposing conditions on my approval to provide one or more legal aid services or specified legal services. Imposing interim restrictions under s101 of the Legal Services Act. Cancelling my approval to provide one or more legal aid services or specified legal services. because: (please explain your grounds for a review) | Criminal 4 | Court of Appeal/Supreme Court | Police Detention Legal Assistance | | |
| Imposing conditions on my approval to provide one or more legal aid services or specified legal services. Imposing sanctions under s102 of the Legal Services Act. Cancelling my approval to provide one or more legal aid services or specified legal services. because: (please explain your grounds for a review) | I am asking the Aut | hority to review the Secretary for Jus | tice's decision: (Please tick 🗹) | | |
| Imposing interim restrictions under s101 of the Legal Services Act. Imposing sanctions under s102 of the Legal Services Act. Cancelling my approval to provide one or more legal aid services or specified legal services. because: (please explain your grounds for a review) | Declining my applic | ation for approval to provide one or more leg | al aid services or specified legal services. | | |
| Imposing sanctions under s 102 of the Legal Services Act. Cancelling my approval to provide one or more legal aid services or specified legal services. because: (please explain your grounds for a review) | Imposing conditions | s on my approval to provide one or more leg | al aid services or specified legal services. | | |
| Cancelling my approval to provide one or more legal aid services or specified legal services. because: (please explain your grounds for a review) | Imposing interim re | estrictions under s101 of the Legal Services Ac | rt. | | |
| because: (please explain your grounds for a review) | Imposing sanctions | under s102 of the Legal Services Act. | | | |
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| Part 4: Applicati | on details (continued) | | |
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| b. The legal aid service or legal service that relates to the decision being reviewed is: (Please tick $\overline{\checkmark}$) | | | |
| Criminal 1 | Family | Mental Health | |
| Criminal 2 | Civil | Maori Land Court/Appellate Court/Waitangi Tribunal | |
| Criminal 3 | Immigration/Refugee | Duty Solicitor | |
| Criminal 4 | Court of Appeal/Supreme Court | Police Detention Legal Assistance | |
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| | hority to review the Secretary for Ju | | |
| | ation for approval to provide one or more le | | |
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| | estrictions under s101 of the Legal Services A | xct. | |
| | under s102 of the Legal Services Act. | | |
| Cancelling my appr | oval to provide one or more legal aid service | s or specified legal services. | |
| because: (please explain | your grounds for a review) | | |
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| Part 4: Applicati | on details (continued) | |
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| c. The legal aid serv | vice or legal service that relates to th | ne decision being reviewed is: (Please tick 🗹) |
| Criminal 1 | Family | Mental Health |
| Criminal 2 | Civil | Maori Land Court/Appellate Court/Waitangi Tribunal |
| Criminal 3 | Immigration/Refugee | Duty Solicitor |
| Criminal 4 | Court of Appeal/Supreme Court | Police Detention Legal Assistance |
| I am asking the Aut | hority to review the Secretary for Ju | stice's decision: (Please tick $\overline{\mathcal{A}}$) |
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| | your grounds for a review) | |
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Part 5: Checklist

Please tick to confirm the following \bigvee

You have answered every question relevant to your application.

You have attached a copy of the Secretary for Justice's decision that you want reviewed.

You have attached a copy of all relevant documents in support of your application (eg, certificates, correspondence, or any reports). Documents which you did not submit to the Secretary for Justice at the time of the decision will not be considered in a review of that decision.

Contact details

Review Authority Tribunals Unit Private Bag 32-001, Panama Street Wellington 6146

Level 1,86 Customhouse Quay, Wellington 6011 DX No: SX11159 Ph: 64 4 462 6660 Fax: 64 4 462 6686

Email: tribunals@justice.govt.nz

Office Hours: Monday to Friday 8.30am - 5:00pm

www.justice.govt.nz/tribunals/ra