# **Application for Review of Decision of Local Registration Authority**





Trans-Tasman Mutual Recognition Act 1997 Section 42

#### When to use this form

Use this form to apply for a review of a decision of a local registration authority to the Trans-Tasman Occupations Tribunal (the Tribunal), as per the Trans-Tasman Mutual Recognition Act 1997 (the Act).

### What you need with your application

To complete your application, you need to send:

- A fully completed form
- The prescribed application filing fee

### **Completing this form**

- You can fill in this form electronically. If you do this, you must print, sign and submit it to the Tribunal.
- You can also print and fill in this form by hand. Use a black pen or blue pen, and print clearly IN CAPITALS.
- Answer every question on the form unless the instructions tell you otherwise

### **Payment information**

The fee for filing an application is \$600.

To confirm accepted payment methods and instructions on how to pay the fee, visit our website:

https://www.justice.govt.nz/tribunals/trans-tasman-occupations/apply/

If you need further assistance, then please contact the Tribunal on:

Ph: 64 4 462 6600

Email: tribunals@justice.govt.nz

Application fees are non-refundable.

# Step 1. Give us your details Full name First Address No. Do you have a different postal address? (Please tick to confirm) Yes ☐ No If yes, please provide us your postal address Address No. How can we contact you? (Please tick to confirm) Day Phone Mobile **Email** I consent to being contacted regarding my application at this email address Yes □ No and/or using the contact numbers provided (Please tick to confirm) Who should we contact about matters involving this application? (Please tick to confirm) Contact me Contact my representative Step 2. Tell us about your representative If you name a representative, their details will be used for all communication relating to your application. (See s62(1) of the Act) Is your representative a lawyer? Yes No (You must complete 'Form 10 - Authority to Act' available on https://www.justice.govt.nz/tribunals/trans-tasmanoccupations/apply/) What is your representative's name? Full name First Company/firm name (if applicable)

What is your representative's address?				
Address	s No.	Street	Suburb	
	City		State (if outside	NZ)
	Country			
How car	n we contac	t your representat	ive?	
Phone	Day		Mobile	
Email _				
		etails of the	local registration au	uthority
Name of	f Contact Peority:	erson First	Middle	Surname
What is	their mailin	g address?		
Address	No.	Street	Suburb	
	City		State (if outside	NZ)
	Country		Post code	
How car Phone		et this person?	Mobile	
Email				
			nail address, we can use these deta	ails to send them correspondence
Step	4. Give	us details	of the decision to be	reviewed
		_	ons Tribunal for a review of the	decision of:
Name of	local registr	ation authority		
Made or	n :	_11	(day/month/year)	
	the referend d by the Reg ty?			
Please a	attach a cop	y of the decision y	ou are applying to review	(Please tick to confirm)

Step 5. Provide the grounds for review				
What are grounds for your review?				
If you need extra space, please attach a separate sheet to this application				
Step 6. Provide the facts of the case				
What are the facts to support the grounds of your review?				
If you need extra space, please attach a separate sheet to this application				

## Step 7. Tell us the order you are seeking

(Please tick to confirm)

1.   	seek the following interim order under section 43(2) of the Act (if applicable): In relation to a decision to impose conditions on my registration, I seek an interim order permitting me to carry on the occupation without complying with the conditions; or
	In relation to a decision to refuse to grant my registration, I seek an interim order extending deemed registration for a period specified by the Tribunal.
AND	
2.	seek the order under section 44(2) of the Act (if applicable):
	That I (an individual registered in a particular occupation in an Australian jurisdiction) am entitled to registration in a particular occupation in New Zealand; or
	That I (an individual registered in a particular occupation in an Australian jurisdiction) am entitled to registration in a particular occupation in New Zealand, subject to conditions; or
(Ela	porate if necessary)
Арр	licant's signature:
Date	: / (day/month/year)

### Step 8. Do a quick check

### Before sending in this form - check:

You have attached:



A certified original of your existing registration; or



A certified copy of your existing registration

and



A Statutory Declaration form (available at https://www.justice.govt.nz/tribunals/trans-tasman-occupations/apply/) verifying your existing registration; or



A Statutory Declaration form (available at https://www.justice.govt.nz/tribunals/trans-tasman-occupations/apply/) verifying a document that identifies you (for example a copy of your passport)

and



You have annexed all documents to this application form (see regulation 3(1.c))

and



You have attached a copy of the decision to be reviewed



You have attached all other necessary documents to support your application

You have answered every question

You have signed and dated this form

You have paid the required fee (refer payment information at the beginning of this form)

### Step 9. Send in this form

You can fill in this form online and post it to:

Trans-Tasman Occupations Tribunal

Tribunals Unit DX SX 11159 Wellington

Address: Level 1, 86 Customhouse Quay, Wellington 6011

Phone: 64 4 462 6600

Email: tribunals@justice.govt.nz

Website: https://www.justice.govt.nz/tribunals/trans-tasman-occupations/