

**Adjudication application form**

*Body Corporate and Community Management Act 1997*

This form is effective from 1 June 2010

Department of **Justice and  
Attorney-General**

**Office Use Only**

Date lodged ..... Time lodged ..... File subject matter ..... MIS ref number .....

**Section 1—Body Corporate/Scheme Information**

Name of scheme ..... CTS/CMS number .....

Address.....

Locality/suburb ..... State  Postcode

Number of lots .....

Regulation Module (*Standard, Accommodation, Commercial or Small Schemes*) .....

**Section 2—Secretary's information**

Name (Individual or corporation).....

Address.....

Locality/suburb ..... State  Postcode

Daytime phone..... Home phone .....

Mobile..... Fax .....

Email.....

**Section 3—Body Corporate Manager's information**

Name (Individual or corporation).....

Address.....

Locality/suburb ..... State  Postcode

Daytime phone..... Home phone .....

Mobile..... Fax .....

Email.....

**Section 4(a)—Applicant's information**

Name.....

Address.....

Locality/suburb ..... State  Postcode

Daytime phone..... Home phone .....

Mobile..... Fax .....

Email.....

Lot number..... on Plan number..... Circle plan type: BUP/GTP/SP

**Section 4(b) – Are you applying as?**

Note: Your application will be checked for jurisdiction under the BCCM Act.

Please refer to the Guide to completing an Adjudication Application Form.

- |   |  |
|---|--|
| <input type="checkbox"/> an owner           | <input type="checkbox"/> an occupier                   |
| <input type="checkbox"/> the body corporate | <input type="checkbox"/> the body corporate manager    |
| <input type="checkbox"/> the committee      | <input type="checkbox"/> a committee member            |
| <input type="checkbox"/> letting agent      | <input type="checkbox"/> caretaking service contractor |
| <input type="checkbox"/> service contractor |  |

**Section 5(a) – Respondent's information**

Name (Individual or corporation) .....

Address .....

Locality/suburb ..... State  Postcode

Daytime phone ..... Home phone .....

Mobile ..... Fax .....

Email .....

**Section 5(b) – Is the respondent?**

- |   |  |
|---|--|
| <input type="checkbox"/> an owner           | <input type="checkbox"/> an occupier                   |
| <input type="checkbox"/> the body corporate | <input type="checkbox"/> the body corporate manager    |
| <input type="checkbox"/> the committee      | <input type="checkbox"/> a committee member            |
| <input type="checkbox"/> letting agent      | <input type="checkbox"/> caretaking service contractor |
| <input type="checkbox"/> service contractor |  |

**Section 5(c) – Are other persons affected by the outcome sought by you?**

Yes (If yes, please provide details below)  No

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**Section 6(a) – What attempts have you made to resolve your dispute by internal dispute resolution and/or departmental conciliation?**

Your application may be rejected if you have not attempted conciliation.

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