



## ADJUDICATION APPLICATION FORM

**Office Use Only**

**Date Lodged:** \_\_\_\_\_ **Time Lodged:** \_\_\_\_\_ **File Subject Matter:** \_\_\_\_\_ **MIS Ref No:** \_\_\_\_\_

**Section 1  
Body  
Corporate  
/ Scheme  
Information**

Name of Scheme ..... CTS/CMS No .....

Address .....

Locality/Suburb ..... State  Postcode

No 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 Ph..... Home Ph..... Mobile .....

Fax..... Email Address.....

**Section 3  
Body  
Corporate  
Manager's  
Information**

Name (Individual or corporation) .....

Address .....

Locality/Suburb ..... State  Postcode

Daytime Ph..... Home Ph..... Mobile .....

Fax..... Email Address.....

**Section 4(a)  
Applicant's  
Information**

Name .....

Address .....

Locality/Suburb ..... State  Postcode

Daytime Ph..... Home Ph..... Mobile .....

Fax..... Email Address.....

Lot No..... on Plan No..... 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 |  |





