

APPLICATION FOR ADJUDICATION FORM

Adjudication Identification number #

This form includes all the requirements of the Act and the regulations. Further requirements have been included by the Department of Housing and Works in the interest of assisting individuals using them. The mandatory requirements prescribed in the Act and the regulations are clearly indicated with an asterisk.

To (Registered Prescribed Appointer or Adjudicator)

*Name: _____

*Business Address: _____

*Phone Number: _____ Fax number: _____

From (Claimant's Name):

*Name: _____

*ABN (where applicable): _____ ACN (where applicable): _____

*Business Address: _____

*Phone Number: _____ Fax number : _____ Email: _____

Respondent's Name:

*Name: _____

*ABN (where applicable): _____ ACN (where applicable): _____

*Business Address: _____

*Phone Number: _____ Fax number: _____

Contract Details

*Copy of written contract or other materials evidencing the contract.

Payment claim details for claim made under the contract.

*Copy of the claim made under the contract, which is disputed, or has not been paid, and any material from the principal rejecting the claim.

Further information/points in support of claim

*Any information or argument in support of the validity of the claim or to address the principal's rejection of the claim.

Signed (claimant/applicant): _____ Date: _____

Service of this Adjudication Application Form

* This application must be served on the relevant parties prescribed in the regulations within 28 days after a payment dispute arises by either:

- (a) delivery to each party personally or to them via one of their representatives with a receipt of service being obtained. Application also to be mailed if delivered personally; or
- (b) Using registered or certified mail.

Immediately after the Claimant has served this application on the Respondent, they should advise the Adjudicator in writing about how and when the Respondent was served with the Application and the address at which it was served.

Statistical Information

Claimant's status (eg. subcontractor, contractor, consultant, supplier): _____

Business Type of Claimant (eg. Electrician, Plumber, Architect): _____

Business Type of respondent (eg. Government agency, developer, head contractor, head consultant, fabricator of materials): _____