



# **Fair Work Australia Rules 2010<sup>1</sup>**

**as amended**

made under section 609(1) of the

*Fair Work Act 2009*

---

This compilation was prepared on 24 February 2012 taking into account amendments up to *Fair Work Australia Amendment Rules 2012 (No. 1)* (F2012L00028).

Prepared by the Department of Education, Employment and Workplace Relations.

## Contents

<b>Part 1</b>	<b>General</b>	<b>6</b>
1	Name of Rules	6
2	Commencement	6
3	Definitions	6
4	Relief from Rules	6
5	Directions on procedure	7
6	Forms	7
7	Lodging documents with FWA	7
8	Requirement to serve documents lodged with FWA	8
9	How service is effected	8
10	Substituted service	11
11	Electronic signatures	11
<b>Part 2</b>	<b>Appeals and reviews</b>	<b>12</b>
12	Appeals	12
13	Review on application by Minister	12
13A	Other reviews	12
<b>Part 3</b>	<b>Unfair dismissal</b>	<b>13</b>
14	Applications may be made by telephone	13
14A	Employer response to an application for an unfair dismissal remedy	13
15	Objection to an application for unfair dismissal remedy	13
16	Security for the payment of costs	14
<b>Part 4</b>	<b>General protections applications</b>	<b>15</b>
16A	Employer response to a general protections application	15
<b>Part 4A</b>	<b>Unlawful termination applications</b>	<b>16</b>
16AA	Employer response to an unlawful termination application	16
<b>Part 5</b>	<b>Take-home pay order applications</b>	<b>17</b>
16B	Employer response to a take-home pay order application	17
<b>Part 6</b>	<b>Practice</b>	<b>18</b>
17	Notice of representative commencing or ceasing to act	18
17A	Representation other than at conference or hearing	18
18	Order to witness to attend	18
19	Order for production of documents	18
20	Lodging documents by email	19
21	Lodging documents by fax	20

		Page
<b>Part 7</b>	<b>Miscellaneous</b>	<b>21</b>
22	Seal of FWA	21
23	Recovery of cost of providing copies of documents	21
<b>Part 8</b>	<b>Transitional</b>	<b>22</b>
24	WR Act applications	22
<b>Part 9</b>	<b>Repeal</b>	<b>23</b>
25	<i>Fair Work Australia Rules 2009</i>	23
<b>Schedule 1</b>	<b>Table of forms contained in Schedule 2</b>	<b>24</b>
<b>Schedule 2</b>	<b>Forms</b>	<b>29</b>
Form F1	Application (No specific form provided)	29
Form F2	Application for Unfair Dismissal Remedy	32
Form F3	Employer's Response to Application for Unfair Dismissal Remedy	36
Form F4	Objection to Application for Unfair Dismissal Remedy	39
Form F5	Application for Security for Payment of Costs	41
Form F6	Application for Costs	43
Form F7	Notice of Appeal	44
Form F8	Application for FWA to Deal with a General Protections Dispute	47
Form F8A	Employer's Response to Application for FWA to Deal with a General Protections Dispute	52
Form F9	Application for FWA to Deal with an Unlawful Termination Dispute	55
Form F9A	Employer's Response to Application for FWA to Deal with an Unlawful Termination Dispute	60
Form F10	Application for FWA to Deal with a Dispute in Accordance with a Dispute Settlement Procedure	62
Form F11	Application for FWA to Deal with a Bargaining Dispute	66
Form F12	Application for FWA to Deal with a Right of Entry Dispute	69
Form F13	Application for FWA to Deal with a Stand Down Dispute	71
Form F14	Application for an Order to Stop etc. (Unprotected) Industrial Action	73
Form F16	Application for Approval of Enterprise Agreement	75
Form F17	Employer's Declaration in Support of Application for Approval of Enterprise Agreement	80
Form F18	Declaration of Employee Organisation in relation to an Application for Approval of Enterprise Agreement	87
Form F19	Application for Approval of Greenfields Agreement	90
Form F20	Employer's Declaration in Support of Application for Approval of Greenfields Agreement	93
Form F21	Declaration of Employee Organisation in Support of Application for Approval of Greenfields Agreement	101
Form F23	Application for Approval of Variation of Enterprise Agreement	104
Form F23A	Employer's Declaration in Support of Approval of Variation of Enterprise Agreement	108

	Page
Form F23B	Declaration of Employee Organisation in Support of Application for Approval of Variation of Enterprise Agreement 114
Form F24	Application for Termination of Enterprise Agreement 117
Form F25	Application to Vary Transitional Instrument to Remove Ambiguities etc. 120
Form F28	Application for Termination of Collective Agreement-based Transitional Instrument 122
Form F29	Application for Approval of Termination of Individual Agreement-based Transitional Instrument 125
Form F30	Application for a Majority Support Determination 128
Form F31	Application for a Scope Order 131
Form F32	Application for a Bargaining Order 134
Form F33	Application for a Serious Breach Declaration 137
Form F34	Application for a Protected Action Ballot Order 139
Form F35	Application for Variation of a Protected Action Ballot Order 142
Form F36	Application for Revocation of a Protected Action Ballot Order 144
Form F37	Application for an Order to Suspend or Terminate Protected Industrial Action 146
Form F38	Application for an Order for Extension of a Suspension of Protected Industrial Action 149
Form F39	Application for an Order in Relation to Partial Work Bans 151
Form F40	Application for Orders in Relation to Transfer of Business 153
Form F41	Application to Vary a Transferable Instrument 155
Form F42	Application for an Entry Permit 157
Form F43	Application for an Order for Access to Non-Member Records 161
Form F44	Application for an Exemption from Requirement to Provide Entry Notice 164
Form F45	Application for an Affected Member Certificate 166
Form F46	Application to Vary a Modern Award 168
Form F47	Application to Vary a Pre-reform or Transitional Award 170
Form F47A	Application for a Take-home Pay Order (Individual Employee/Outworker) 172
Form F47B	Response to Application for a Take-home Pay Order (Individual Employee/Outworker) 175
Form F47C	Application for a Take-home Pay Order (Multiple Employees/Outworkers) 177
Form F47D	Response to an Application for a Take-home Pay Order (Multiple Employees/Outworkers) 181
Form F48	Application for Directions on Procedure 183
Form F49	Application for Order for Substituted Service 185
Form F50	Notice of Discontinuance 187
Form F51	Order Requiring a Person to Attend Fair Work Australia 188
Form F52	Order Requiring Production of Documents etc. to Fair Work Australia 190
Form F53	Notice of Representative Commencing to Act 192
Form F54	Notice of Representative Ceasing to Act 193
Form F55	Application by an Association of Employers for Registration as an Organisation 195

	Page
Form F56	197
Form F57	199
Form F58	201
Form F59	203
Form F60	204
Form F61	205
Form F62	206
Form F63	207
Form F64	208
Form F65	209
Form F66	211
Form F67	213
Form F68	214
Form F68A	216
Form F69	218
Form F70	220
Form F71	222
<b>Notes</b>	224

Rule 1

---

## Part 1                      General

### 1                      Name of Rules

These Rules are the *Fair Work Australia Rules 2010*.

### 2                      Commencement

These Rules commence on 1 January 2011.

### 3                      Definitions

In these Rules:

**Act** means the *Fair Work Act 2009*.

**FWA** means:

- (a) Fair Work Australia; or
- (b) an FWA Member; or
- (c) a Full Bench of FWA; or
- (d) a person holding a delegation from the President or the General Manager to perform the act or function concerned;

as the context requires.

**FWA Bulletin** means the publication, prepared and published by the General Manager of FWA, that sets out:

- (a) notices required by these Rules to be published in that Bulletin; and
- (b) other information concerning notice of matters before FWA or the practice and procedure of FWA.

**Regulations** means the *Fair Work Regulations 2009*.

**RO Act** means the *Fair Work (Registered Organisations) Act 2009*.

**RO Regulations** means the *Fair Work (Registered Organisations) Regulations 2009*.

**Transitional Act** means the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*.

**WR Act** means the *Workplace Relations Act 1996*.

*Note* The *Fair Work Act 2009* defines other words and phrases that apply to these Rules, including:

- General Manager.

### 4                      Relief from Rules

FWA may dispense with compliance with any of the requirements of these Rules before or after the occasion for compliance arises.

---

**Rule 7**

---

**5 Directions on procedure**

- 5.1 If a person seeks to commence a proceeding or take any step in a proceeding, and:
- (a) the procedure to be followed is not prescribed by the Act, the Regulations, these Rules or by or under any other Act or Regulations; or
  - (b) the person is in doubt as to the correct procedure to be followed;
- the person may apply to FWA for directions regarding the correct procedure to be followed.
- 5.2 Any act taken in accordance with a direction of FWA given in response to an application under subrule 5.1 is regular and sufficient.

**6 Forms**

- 6.1 Schedule 1 is a table of the forms contained in Schedule 2.
- 6.2 Subject to these Rules:
- (a) an application to FWA must be made using the form in Schedule 2 that is specified for the purpose in Schedule 1; and
  - (b) notice must be given to FWA using the form in Schedule 2 that is specified for the purpose in Schedule 1.
- 6.3 Subject to rule 24, an application to FWA for which no specific form is provided must be made using Form F1.
- 6.4 If these Rules require that a form be used, it is sufficient compliance if the document:
- (a) is substantially in accordance with the required form; or
  - (b) has only such variations as the nature of the case requires.
- 6.5 Forms F55 to F70 are approved forms for the purposes of the RO Regulations.

**7 Lodging documents with FWA**

- 7.1 A document lodged for use by FWA must:
- (a) either:
    - (i) be on white international A4 size paper; or
    - (ii) if the document is being lodged by email — have an A4 page layout; and
  - (b) be typewritten, clearly written or reproduced.
- 7.2 A document may be lodged with FWA:
- (a) by physically delivering the document to a FWA office between the hours of 9am and 5pm; or
  - (b) by email (see rule 20); or
  - (c) by fax (see rule 21); or

**Rule 8**

---

- (d) if FWA has made provision on its website for lodging a document by completing and submitting a web-based form — by completing and submitting that form in accordance with the instructions accompanying the form on the website.

*Note 1* FWA's website is <http://www.fwa.gov.au>. The addresses of FWA offices can be found at <http://www.fwa.gov.au/index/cfm?pagename=headercontact>.

*Note 2* An application for an unfair dismissal remedy may also be made by phone (see rule 14).

- 7.3 The first page of a witness statement, statutory declaration or submission that is lodged with FWA must be headed in the following form:

**IN FAIR WORK AUSTRALIA**

**Matter No.:** *[insert matter number]*

**Applicant:** *[insert name of applicant]*

**Respondent:** *[insert name(s) of respondent(s)]*

or, if there is no respondent:

**IN FAIR WORK AUSTRALIA**

**Matter No.:** *[insert matter number]*

**Re Application by:** *[insert name of applicant]*

- 7.4 The first page of a witness statement, statutory declaration or submission lodged with FWA must also have an information block at the foot of the first page in the following form:

<b>Lodged by</b> <i>[party e.g. Applicant]</i>	Telephone:
<b>Address for Service:</b>	Fax:
	Email:

**8 Requirement to serve documents lodged with FWA**

- 8.1 A person who makes an application or gives a notice to FWA must serve a copy of the application or notice in accordance with the instructions as to service on the form for the application or notice.
- 8.2 If an application is made using Form F1, the applicant may seek directions from FWA as to the service that is required.

**9 How service is effected**

- 9.1 Subject to these Rules, and any directions of FWA, a party that is required to serve a document on another party, or other parties, to a proceeding must serve the document as soon as practicable.

**Rule 9**

9.2 Service of a document on an individual, a body corporate or an organisation or branch of an organisation must be effected:

- (a) by leaving the document with:
  - (i) the individual to whom it is addressed; or
  - (ii) the secretary of the body corporate; or
  - (iii) the secretary of the organisation or branch; or
- (b) by tendering the document to:
  - (i) the individual to whom it is addressed; or
  - (ii) the secretary of the body corporate; or
  - (iii) the secretary of the organisation or branch; or
- (c) by leaving the document:
  - (i) with an individual, apparently above the age of 15 years, at the residence, or usual place of business, of the individual who is intended to be served; or
  - (ii) at the registered office of the body corporate; or
  - (iii) at the office of the organisation or branch; or
  - (iv) in a proceeding in which the individual, body corporate or organisation or branch has notified an address for service — at that address; or
- (d) by posting the document in a prepaid envelope sent by Express Post or registered post to:
  - (i) the residence, or usual place of business, of the individual intended to be served; or
  - (ii) the secretary, at the registered office of the body corporate; or
  - (iii) the secretary, at the office of the organisation or branch; or
  - (iv) in a proceeding in which the individual, body corporate or organisation or branch has lodged an address for service — at that address;

provided that if service is by Express Post, the party serving the document must retain the barcode of the pre-paid envelope and produce it if required by FWA; or
- (e) by fax to a fax number:
  - (i) currently published by the party who is being served as his, her or its fax number; or
  - (ii) advised by the party who is being served as his, her or its fax number in response to a request for a fax number that was made immediately before the transmission of the document; or
  - (iii) appearing as the fax number of the party who is being served on a document lodged with FWA by that party in the same matter;

provided that a transmission record showing the successful transmission is retained and produced if required by FWA; or
- (f) by emailing the document to an email address:
  - (i) currently published by the party who is being served as his, her or its email address; or

**Rule 9**

---

- (ii) advised by the party who is being served as his, her or its email address in response to a request for an email address that was made immediately before the transmission of the document; or
- (iii) appearing as the email address of the party who is being served on a document lodged with Fair Work Australia by that party in the same matter;

provided that the party who is serving the document:

- (iv) prints the email as a “sent item”, showing the transmission address and the date and time of transmission; or
- (v) prints a “delivered” statement or a “read receipt” showing the transmission address and the date and time of transmission;

and that the document so printed is retained and produced if required by FWA; or

(g) if:

- (i) the person to be served is an employee of the party who is serving the document; and
- (ii) a common form of communication between the employer and the employee is by email to a particular email address; and
- (iii) it is reasonable for the employer to expect that an email to that email address will be received by the employee;

by emailing the document to that email address, provided that the employer:

- (iv) prints the email as a “sent item”, showing the transmission address and the date and time of transmission; or
- (v) prints a “delivered” statement or a “read receipt” showing the transmission address and the date and time of transmission;

and that the document so printed is retained and produced if required by FWA.

9.3 For subrule 9.2:

**registered office**, in relation to a body corporate, means the principal office or the principal place of business of the body corporate.

**secretary**, in the case of a body corporate that is established under a law of the Commonwealth or of a State or Territory of the Commonwealth, means the secretary, clerk or other proper officer of the body corporate.

9.4 For section 29 of the *Acts Interpretation Act 1901*, if service of a document is effected by posting it in accordance with paragraph 9.2 (d), a certificate:

- (a) signed by:
  - (i) a person occupying, or performing the duties of, the office of a General Manager, Australian Postal Corporation; or
  - (ii) a person authorised in writing by that person to give a certificate under this subrule; and
- (b) stating that a letter that was posted (with prepaid postage) at a specified time, on a specified day and at a specified place, and addressed to a specified address, would, in the ordinary course of the post, have been delivered at that address on a specified day;

is evidence of the facts stated.

## **10 Substituted service**

If provision is made for personal, or other, service of a document in a proceeding before FWA, FWA may, on the application of a party, make an order for substituted, or other, service by letter, fax, email, public advertisement or another method, for the purpose of bringing the document to the notice of the person to be served.

*Note* The form of an application for substituted service is Form F49 in Schedule 2.

## **11 Electronic signatures**

If a document, other than a statutory declaration, is required by these Rules to be signed, the requirement is satisfied if a facsimile of the signature is affixed on the document by electronic means by, or at the direction of, the signatory.

**Rule 12**

---

## **Part 2                      Appeals and reviews**

### **12              Appeals**

- 12.1      A party seeking to institute an appeal against a decision of a single FWA Member (or a person exercising a delegation from the President or the General Manager) must do so by lodging a notice of appeal in accordance with Form F7.
- 12.2      If an appeal is instituted against a decision of a single FWA Member, the appellant, at the time of lodging the notice of appeal, must also lodge 3 copies of the notice, together with 3 copies of a paginated appeal book containing:
- (a) any order made by FWA; and
  - (b) the statement of the reasons for the decision; and
  - (c) the transcript of the evidence and argument in the proceedings from which the appeal is brought, or the relevant extract from the transcript; and
  - (d) each document that:
    - (i) was an exhibit or written submission in the proceedings; and
    - (ii) relates to the grounds of appeal set out in the notice.
- 12.3      An appeal must be instituted:
- (a) within 21 days after the date of the award, order or decision appealed against; or
  - (b) on application to FWA — within such further time as is allowed.
- 12.4      On lodging a notice of appeal, the appellant must, as soon as practicable, serve a copy of the notice of appeal and the appeal book lodged in accordance with subrule 12.2 on the other parties to the proceedings from which the appeal is brought.

### **13              Review on application by Minister**

The procedure to be followed in an application under section 605 of the Act must be generally in accordance with the procedure prescribed by rule 12.

### **13A            Other reviews**

If legislation confers on FWA a jurisdiction to review a decision made by a decision maker other than FWA (or a person exercising a delegation from the President or the General Manager), and the legislation does not specify a time within which the review must be instituted, a person aggrieved who seeks a review of the decision must file an application for review, using Form F1:

- (a) within 21 days after the date of the decision; or
- (b) on application to FWA — within such further time as is allowed.

---

## Part 3 Unfair dismissal

### 14 Applications may be made by telephone

Despite rule 6, an application for an unfair dismissal remedy may be made by telephone at a telephone number approved for that purpose, provided that:

- (a) the applicant pays the application fee prescribed in the Regulations by credit card, or applies for a waiver of the fee at the time the telephone application is made; and
- (b) the applicant signs and returns to FWA a copy of the written application generated by FWA (amended as necessary to correct any errors) together with a completed application for waiver if a waiver of the fee has been sought.

*Note 1* The telephone number approved for making an application for an unfair dismissal remedy by telephone can be found on FWA's website at:  
[http://www.fwa.gov.au/documents/rules\\_contact\\_details.pdf](http://www.fwa.gov.au/documents/rules_contact_details.pdf).

*Note 2* The written application generated by FWA, and any application for waiver of the fee, will be sent by FWA to the person who makes a telephone application under this rule.

*Note 3* A telephone application will not be accepted unless the requirement in (a) is complied with. An application made under this rule will not be further processed by FWA until the requirement in (b) has been complied with.

### 14A Employer response to an application for an unfair dismissal remedy

A respondent to an application for an unfair dismissal remedy (Form F2) must lodge with FWA and serve on the applicant a response to the application in accordance with Form F3 within the time specified by, or directed in correspondence from, FWA.

### 15 Objection to an application for unfair dismissal remedy

A respondent to an application for an unfair dismissal remedy who wishes to take a jurisdictional or other objection to the application must:

- (a) indicate the objection or objections in the Employer's Response to Application for Unfair Dismissal Remedy (Form F3) that was lodged by the respondent; or
- (b) if the objection is, or the objections are, taken at a later time — lodge an Objection to Application for Unfair Dismissal Remedy using Form F4.

*Note 1* Information about the grounds upon which a respondent can object to an application for unfair dismissal remedy can be found on FWA's website at:  
<http://www.fwa.gov.au/index.cfm?pagename=dismissalprocess>.

*Note 2* This rule is **not** concerned with an objection that the dismissal was fair but, rather, with objections that may need to be considered and determined separately before a conference or hearing on the merits of the application.

**Rule 16**

---

**16 Security for the payment of costs**

- 16.1 FWA may, on application, make an order directing a person to furnish security for the payment of costs in respect of a matter or part of a matter arising under Part 3-2 of the Act.

*Note* FWA will not ordinarily make such an order before the conclusion of conciliation.

- 16.2 The security must be of such amount, and furnished at such time and in such manner and form, as FWA directs.

- 16.3 FWA may, on further application:

- (a) reduce or increase the amount of security directed to be given; and
- (b) vary the time at which, or manner or form in which, the security is to be furnished.

- 16.4 Without limiting any other power which FWA may exercise, if FWA directs a person to furnish security for costs in respect of a matter or part of a matter arising under Part 3-2 of the Act, it may order that the matter be:

- (a) adjourned until security is furnished; or
- (b) adjourned indefinitely.

## **Part 4                      General protections applications**

### **16A        Employer response to a general protections application**

A respondent to an Application for FWA to Deal with a General Protections Dispute (see Form F8) must, within 7 days of being served with the application, lodge with FWA and serve on the applicant a response to the application in accordance with Form F8A.

**Rule 16AA**

---

**Part 4A                      Unlawful termination applications****16AA      Employer response to an unlawful termination application**

A respondent to an Application for FWA to Deal with an Unlawful Termination Dispute (see Form F9) must, within 7 days of being served with the application, lodge with FWA and serve on the applicant a response to the application in accordance with Form F9A.

## **Part 5                      Take-home pay order applications**

### **16B        Employer response to a take-home pay order application**

- 16B.1    A respondent to an Application for a Take-home Pay Order (Individual Employee/Outworker) (see Form F47A) must, within 14 days of being served with the application, lodge with FWA and serve on the applicant a response to the application in accordance with Form F47B.
- 16B2    A respondent to an Application for a Take-home Pay Order (Multiple Employees/Outworkers) (see Form 47C) must, within 14 days of being served with the application, lodge with FWA and serve on the applicant a response to the application in accordance with Form F47D.

**Rule 17**

---

**Part 6 Practice****17 Notice of representative commencing or ceasing to act**

- 17.1 A person who commences to act as a solicitor, paid agent or other representative of a party to a matter already before FWA must lodge a notice in accordance with Form F53.
- 17.2 Subject to section 596 of the Act, FWA may permit a person to represent a party in a matter before FWA despite the person's failure to lodge a notice in accordance with subrule 17.1.
- 17.3 A person who ceases to act as a solicitor, paid agent or other representative of a party to a matter before FWA must lodge a notice in accordance with Form F54.

**17A Representation other than at conference or hearing**

- 17A.1 For section 596 of the Act, and subject to a direction by FWA to the contrary, a party to a proceeding before FWA may be represented by a lawyer or paid agent for the purpose of preparing and/or lodging any written application (including an originating application) or written submission, corresponding with FWA or lodging any document with FWA.
- 17A.2 To remove doubt, nothing in this rule is to be taken as permitting a lawyer or paid agent to represent a party in a conference or hearing before FWA.

*Note* See section 596 of the Act for when FWA may permit a lawyer or paid agent to represent a party at a conference or hearing.

**18 Order to witness to attend**

- 18.1 A party may seek an order under paragraph 590(2)(a) of the Act requiring a person to attend by submitting a draft order in accordance with Form F51 to FWA.
- 18.2 If the order is made, service of the order must be effected by serving a copy of the signed order in accordance with rule 9.

**19 Order for production of documents**

- 19.1 A party may seek an order under paragraph 590(2)(c) of the Act for the production of documents or records or any other information by submitting a draft order in accordance with Form F52 to FWA.
- 19.2 If the order is made, service of the order must be effected by serving a copy of the signed order in accordance with rule 9.

---

**Rule 20**

---

**20 Lodging documents by email**

- 20.1 Subject to subrule 20.2, a document that is required or permitted to be lodged by these Rules may be lodged by emailing the document to FWA to any email address that is approved by the General Manager for the lodgment of documents electronically.

*Note* The email addresses approved for lodgment of documents electronically can be found on FWA's website at:

[http://www.fwa.gov.au/documents/rules\\_contact\\_details.pdf](http://www.fwa.gov.au/documents/rules_contact_details.pdf).

- 20.2 If a matter has been allocated to an FWA Member, any document lodged by email must be sent to the email address of the FWA Member's chambers.

*Note* The email addresses can be found on FWA's website at:

[http://www.fwa.gov.au/documents/rules\\_contact\\_details.pdf](http://www.fwa.gov.au/documents/rules_contact_details.pdf).

- 20.3 If a document is to be lodged by email under this rule, the email must:

- (a) include the document to be lodged:
  - (i) as an attachment in Word, RTF or PDF format or another format approved by the General Manager; and
  - (ii) with all security restrictions removed; and
- (b) state, in the body of the email:
  - (i) the name, address, telephone number and fax number (if any) of the natural person sending the email; and
  - (ii) an email address to which FWA can send notices or other documentation; and
  - (iii) if the document is an originating application — that fact, together with the State or Territory office in which the document is to be lodged; and
  - (iv) if the document relates to an existing matter — the FWA matter number.

- 20.4 A statutory declaration that is required by these Rules may be lodged by email only by sending a PDF or other image of the statutory declaration in accordance with subrule 20.3.

*Note* A statutory declaration must be signed and witnessed.

- 20.5 If a document lodged in accordance with rule 20 is an application commencing a proceeding, the General Manager must send an acknowledgment of lodgment to the lodging party by email.

- 20.6 If a document lodged electronically in accordance with rule 20 is an application commencing a proceeding, it is taken not to have been lodged until the acknowledgment of lodgment mentioned in subrule 20.5 has been sent. When the acknowledgment is dispatched, the document will be treated as lodged at the time it was received electronically.

- 20.7 A person who lodges a document by email must:

- (a) retain a paper copy of the document; and
- (b) retain a paper copy of either:
  - (i) the receipt that indicates the document was delivered; or

**Rule 21**

---

- (ii) the email as a “sent item” showing the transmission address and the date and time of transmission; and
- (c) produce the paper copy of the documents retained under paragraphs (a) and (b), as directed by FWA.

**21 Lodging documents by fax**

- 21.1 A document that is required or permitted to be lodged by these Rules may be lodged by fax sent to the fax number that is approved by the General Manager for lodgment of documents by fax.

*Note* The fax numbers approved for lodgment of documents by fax can be found on FWA’s website at:

[http://www.fwa.gov.au/documents/rules\\_contact\\_details.pdf](http://www.fwa.gov.au/documents/rules_contact_details.pdf).

- 21.2 A document sent to FWA by fax must be accompanied by a cover sheet stating clearly:

- (a) the sender’s name, postal address, document exchange number (if any), telephone number and fax number; and
- (b) the number of pages transmitted; and
- (c) the processing of the document required.

- 21.3 A person who lodges a document by fax under this rule must:

- (a) keep the original document and the transmission report evidencing successful transmission; and
- (b) produce the original document or the transmission report as directed by FWA or the General Manager.

- 21.4 If FWA or the General Manager directs that the original document be produced, the first page of the document must be endorsed with:

- (a) a statement that the document is the original of a document sent by fax; and
- (b) the date that the document was sent by fax.

## Part 7                      Miscellaneous

### **22            Seal of FWA**

- 22.1        The seal mentioned in subsection 651(1) of the Act is in the form represented below:



- 22.2        If a document is required to have the seal affixed, the requirement is satisfied if a facsimile of the seal is affixed on the document by electronic means, by or at the direction of the person affixing the seal.

### **23            Recovery of cost of providing copies of documents**

- 23.1        This rule applies if FWA proposes to provide a copy or copies of a document to a person (whether in the form of photocopies, fax transmission, electronic data, printed documents or otherwise).
- 23.2        The person must pay to FWA in advance an amount that FWA reasonably requires to be paid.

**Rule 24**

---

**Part 8                      Transitional****24              WR Act applications**

Any application that could have been made under the WR Act, and that may be made to FWA by virtue of a provision of the Transitional Act or any other Act or regulation, may be made in accordance with the *Australian Industrial Relations Commission Rules 2007* using the form specified in those rules. The form must be varied to identify that the application is made to FWA and identify the provision(s) that authorise the making of the application.

*Note 1* An application for FWA to deal with a dispute in accordance with a dispute resolution procedure in an agreement made under the WR Act must be made using Form F10.

*Note 2* An application for FWA to vary a pre-reform award must be made using Form F47.

## **Part 9                      Repeal**

### **25            *Fair Work Australia Rules 2009***

The *Fair Work Australia Rules 2009* are repealed.

## Schedule 1 Table of forms contained in Schedule 2

(subrule 6.1)

Description	Form	Rule	Legislation*
<b>No Specific Form</b>			
Application (No specific form provided)	F1	6.3	
<b>Unfair Dismissal</b>			
Application for Unfair Dismissal Remedy	F2		s.394 FW Act
Employer's Response to Application for Unfair Dismissal Remedy	F3	14A, 15	
Objection to Application for Unfair Dismissal Remedy	F4	15	
Application for Security for Payment of Costs	F5	16	s.404 FW Act
[Note: Forms for applications for FWA to deal with general protections or unlawful termination disputes appear in the Dispute Resolution section below.]			
<b>Costs</b>			
Application for Costs	F6		ss.376, 401, 611, 780 FW Act
<b>Appeals</b>			
Notice of Appeal	F7	12	s. 604 FW Act
<b>Dispute Resolution</b>			
Application for FWA to Deal with a General Protections Dispute	F8		ss.365, 372 FW Act
Employer's Response to Application for FWA to Deal with a General Protections Dispute	F8A	16A	
Application for FWA to Deal with an Unlawful Termination Dispute	F9		s.773 FW Act
Employer's Response to Application for FWA to Deal with an Unlawful Termination Dispute	F9A	16AA	
Application for FWA to Deal with a Dispute in Accordance with a Dispute Settlement Procedure	F10		s.739 FW Act, and transitional provisions re disputes under WR Act instruments
Application for FWA to Deal with a Bargaining Dispute	F11		s.240 FW Act

Description	Form	Rule	Legislation*
Application for FWA to Deal with a Right of Entry Dispute	F12		s.505 FW Act
Application for FWA to Deal with a Stand Down Dispute	F13		s.526 FW Act
<b>Unprotected Industrial Action</b>			
Application for an Order to Stop etc. (Unprotected) Industrial Action	F14		ss.418, 419 FW Act
<b>Enterprise Agreements</b>			
Application for Approval of Enterprise Agreement	F16		s.185 FW Act
Employer's Declaration in Support of Application for Approval of Enterprise Agreement	F17		s.185 FW Act
Declaration of Employee Organisation in Relation to Application for Approval of Enterprise Agreement	F18		s.185 FW Act
Application for Approval of Greenfields Agreement	F19		s.185 FW Act
Employer's Declaration in Support of Application for Approval of Greenfields Agreement	F20		s.185 FW Act
Declaration of Employee Organisation in Support of Application for Approval of Greenfields Agreement	F21		s.185 FW Act
Application for Approval of Variation of Enterprise Agreement	F23		s.210 FW Act
Employer's Declaration in Support of Approval of Variation of Enterprise Agreement	F23A		s.210 FW Act
Declaration of Employee Organisation in Support of Approval of Variation of Enterprise Agreement	F23B		s.210 FW Act
Application for Termination of Enterprise Agreement	F24		ss.222, 225 FW Act
<b>Transitional Instruments</b>			
Application to Vary Transitional Instrument to Remove Ambiguities etc.	F25		Sch 3, item 10 Transitional Act
Application for Termination of Collective Agreement-based Transitional Instrument	F28		Sch 3, items 15, 16 Transitional Act
Application for Approval of Termination of Individual Agreement-based Transitional Instrument	F29		Sch 3, items 17, 19 Transitional Act

Description	Form	Rule	Legislation*
<b>Bargaining</b>			
Application for a Majority Support Determination	F30		s.236 FW Act
Application for a Scope Order	F31		s.238 FW Act
Application for a Bargaining Order	F32		s.229 FW Act
Application for a Serious Breach Declaration	F33		s.234 FW Act
Application for a Protected Action Ballot Order	F34		s.437 FW Act
Application for Variation of a Protected Action Ballot Order	F35		s.447 FW Act
Application for Revocation of a Protected Action Ballot Order	F36		s.448 FW Act
Application for an Order to Suspend or Terminate Protected Industrial Action	F37		ss.423–426 FW Act
Application for an Order for an Extension of a Suspension of Protected Industrial Action	F38		s.428 FW Act
Application for an Order in Relation to Partial Work Bans	F39		s.472 FW Act
<b>Transfer of Business</b>			
Application for Orders in Relation to Transfer of Business	F40		ss.318, 319 FW Act
Application to Vary a Transferable Instrument	F41		s.320 FW Act
<b>Right of Entry</b>			
Application for an Entry Permit	F42		s.512 FW Act
Application for an Order for Access to Non-member Records	F43		s.483AA FW Act
Application for an Exemption from Requirement to Provide Entry Notice	F44		s.519 FW Act
Application for an Affected Member Certificate	F45		s.520 FW Act
<b>Awards</b>			
Application to Vary a Modern Award	F46		ss.157–160 FW Act
Application to Vary a Pre-reform or Transitional Award	F47		Sch 3, item 12 or Sch 20, Transitional Act
<b>Take-home Pay Order</b>			
Application for a Take-home Pay Order (Individual Employee/Outworker)	F47A		Sch 5, item 9, Transitional Act
Response to Application for a Take-home	F47B	16B.1	

Description	Form	Rule	Legislation*
Pay Order (Individual Employee/Outworker)			
Application for a Take-home Pay Order (Multiple Employees/Outworkers)	F47C		Sch 5, item 9, Transitional Act
Response to Application for a Take-home Pay Order (Multiple Employees/Outworkers)	F47D	16B.2	
<b>Procedural</b>			
Application for Directions on Procedure	F48	5	
Application for Order for Substituted Service	F49	10	
Notice of Discontinuance	F50		s.588 FW Act
Order Requiring a Person to Attend Fair Work Australia	F51	18	para 590(2)(a) FW Act
Order Requiring Production of Documents etc. to Fair Work Australia	F52	19	para 590(2)(c) FW Act
Notice of Representative Commencing to Act	F53	17.1	s.596(2) FW Act
Notice of Representative Ceasing to Act	F54	17.3	s.596(2) FW Act
<b>Organisations</b>			
Application by an Association of Employers for Registration as an Organisation	F55		para 21(1)(a) FW (RO) Regs
Application by an Association of Employees (Other than an Enterprise Association) for Registration as an Organisation	F56		para 21(1)(a) FW (RO) Regs
Application by an Enterprise Association of Employees for Registration as an Organisation	F57		para 21(1)(a) FW (RO) Regs
Notice of Objection to the Registration of an Association	F58		reg 23 FW (RO) Regs
Application for Leave to Change Name/and to Alter Rules	F59		subreg 27(a) FW (RO) Regs
Application by an Organisation for Cancellation of Registration	F60		para 34(1)(a) FW (RO) Regs
Notice of Objection to the Cancellation of Registration of an Organisation	F61		paras 34(5)(a), 36(4)(a) FW (RO) Regs
Application for Cancellation of Registration of an Organisation	F62		para 35(1)(a) FW (RO) Regs
Ballot Paper Chosen by Organisation in Relation to Proposed Amalgamation	F63		para 60(2)(a) FW (RO) Regs
Ballot Paper in Relation to Proposed Amalgamation	F64		para 60(2)(b) FW (RO) Regs
Ballot Paper Chosen by Organisation and Containing an Alternative Provision in Relation to Proposed Amalgamation	F65		para 60(3)(a) FW (RO) Regs

Description	Form	Rule	Legislation*
Ballot Paper Containing an Alternative Provision in Relation to Proposed Amalgamation	F66		para 60(3)(b) FW (RO) Regs
Application for Consent to Change the Name of an Organisation	F67		para 121(1)(a) FW (RO) Regs
Application for Consent to the Alteration of Eligibility Rules of an Organisation	F68		para 121(1)(b) FW (RO) Regs
Application for Consent to the Alteration of Eligibility Rules of an Organisation by General Manager	F68A		para 125B(1)(a) FW (RO) Regs
Application for Certificate under Section 180 of the <i>Fair Work (Registered Organisations) Act 2009</i>	F69		para 128(1)(a) FW (RO) Regs
Application for Renewal of Certificate under Section 180 of the <i>Fair Work (Registered Organisations) Act 2009</i>	F70		para 129(3)(a) FW (RO) Regs
Application for a Representation Order	F71		s.137A FW (RO) Act

## \* Notes:

FW Act means *Fair Work Act 2009*;FW (RO) Act means *Fair Work (Registered Organisations) Act 2009*;FW (RO) Regs means *Fair Work (Registered Organisations) Regulations 2009*;Transitional Act means *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*;WR Act means *Workplace Relations Act 1996*.

## Schedule 2 Forms

### Form F1 Application (No specific form provided)

(Subrule 6.3, Fair Work Australia Rules 2010)

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION (NO SPECIFIC FORM PROVIDED)

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

---

## Respondent(s)

<b>Name:</b>			<b>ABN:</b> <i>[If known]</i>
<b>Address:</b>			
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>	
<b>Contact person:</b> <i>[If known]</i>			
<b>Telephone:</b>	<b>Mobile:</b>		
<b>Fax:</b>	<b>Email:</b>		

The Applicant applies, pursuant to the provision(s) in part 1, for the order or relief set out in part 2 on the grounds specified in part 5.

- Provision(s) under which application is made:**  
*[Set out the provision(s) of the Act or other legislation under which the application is made.]*
- Order or relief sought:**  
*[Set out the terms of the order or relief sought.]*
- What is the industry of the employer?**  
*[Specify industry.]*
- Relevant industrial instrument(s) (if any):**  
*[Set out any modern award, agreement or other industrial instrument relevant to the application and their ID/Code number(s) if known.]*
- Grounds:**  
*[Using numbered paragraphs, set out the grounds, including particulars, upon which the Applicant relies in seeking such order or relief.]*

<b>Date:</b>
<b>Signature:</b>
<b>Name:</b>
<b>Capacity/Position:</b> <i>[If not signed by the Applicant.]</i>

## Service requirements

---

**This application must be served on the named Respondent(s) as soon as practicable after the application is lodged with FWA.**

**This application must also be served on other persons as directed by FWA if and when such direction(s) are given.**

Note: Rules 9 and 10 deal with service.

## Form F2 Application for Unfair Dismissal Remedy

IN FAIR WORK AUSTRALIA

*FWA use only*

FWA Matter No.: U

### APPLICATION FOR UNFAIR DISMISSAL REMEDY

*Fair Work Act 2009—s.394*

[If you require information about completing and lodging this form, please go to <http://www.fwa.gov.au> or call 1300 799 675.]

#### Applicant (Employee)

Name:

Title [if applicable] Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

Address:

Suburb:

State:

Postcode:

Email:

Telephone:

Fax:

Mobile:

#### Applicant's representative (if any)

Name:

ABN: [if applicable]

Address:

Suburb:

State:

Postcode:

Contact person:

Email:

Telephone:

Fax:

Mobile:

#### Respondent (Employer)

Legal name:

Trading name:

ABN: [if known]

Address:

Suburb:

State:

Postcode:

Contact person:

Email:

Telephone:

Fax:

Mobile:

#### 1. What was the period of your employment?

Date employed:

Date notified of dismissal:

Date dismissal took effect:

**2. What were the reasons for dismissal, if any, given by your employer?**

*[Using numbered paragraphs, briefly specify the reason(s), if any, given by the employer for your dismissal. Attach any letter of dismissal and/or separation certificate given to you by your employer.]*

**3. Why was the dismissal unfair?**

*[Using numbered paragraphs, give a description of the relevant facts and circumstances and specify why you say the dismissal was unfair. This should include your response to any reasons for dismissal given by the employer. Attach additional pages if necessary.]*

**4. For the purposes of participating in a conciliation conference do you think you need an interpreter other than a family member or friend?**

☐ Yes — language: *[insert your first language]*

☐ No

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

*[If not signed by the Applicant.]*

**Service requirements**

**This form will be served upon the Respondent by FWA.**

**Notice to the Respondent**

**A respondent must, within 7 days of being served with this application, lodge with FWA and serve on the applicant a response to the application in accordance with Form F3. A copy of that form can be downloaded at [www.fwa.gov.au](http://www.fwa.gov.au).**

*See next page for application fee details.*

### Application fee

The legislation requires a fee to be paid on lodgment of this application with Fair Work Australia unless such requirement is waived by the General Manager on grounds of financial hardship. The fee is adjusted automatically from time to time. The current amount of the fee and information on seeking a waiver can be obtained by contacting FWA on 1300 799 675 or at [www.fwa.gov.au](http://www.fwa.gov.au).

If an application is lodged at a FWA office, the fee can be paid by cash, cheque, money order or credit card (Visa or MasterCard).

If an application is lodged by mail, the fee can be paid by cheque, money order or credit card (in which case, provide credit card details below).

If an application is lodged by fax, the fee must be paid by credit card (provide credit card details below).

If an application is lodged by email or online in accordance with rule 7, **credit card details must not be provided on this form**. Payment of the fee can only be made via FWA's eFiling facility at [www.fwa.gov.au](http://www.fwa.gov.au).

☐ **cash**

☐ **cheque/money order** (to be made payable to: Collector of Public Monies, FWA)

☐ **Visa**

☐ **MasterCard**

**Card number:** \_\_\_\_\_

**Card expiry date:** \_\_\_\_ / \_\_\_\_

**Cardholder's name:**

.....

**Signature:**

.....

Any refund of the application fee will be forwarded to the Applicant at the address on the application form.

*FWA use only*

FWA Matter No.: U.....

Receipt No.: ..... / Credit Transaction  
Processed by: .....

Note: A copy of the completed Form F2 (and any attachments but excluding this page) will be forwarded to your former employer by FWA.

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS

### External Research

From time to time Fair Work Australia undertakes research with participants in unfair dismissal matters to ensure a high quality process. As some research may be undertaken by external providers on behalf of FWA, your contact details may be provided to an external provider for the purposes of inviting you to participate in research. Please mark the box below if you object to being contacted for the purposes of FWA research.

I object to being contacted for the purposes of FWA research

☐

## **Form F3     Employer's Response to Application for Unfair Dismissal Remedy**

*(Rules 14A and 15, Fair Work Australia Rules 2010)*

### **IN FAIR WORK AUSTRALIA**

#### **FWA Matter No.: U**

*[Insert FWA matter number appearing on the main application form.]*

#### **Applicant (Employee):**

*[Insert name of employee from main application.]*

#### **Respondent (Employer):**

*[Insert name of employer.]*

### **EMPLOYER'S RESPONSE TO APPLICATION FOR UNFAIR DISMISSAL REMEDY**

*[If you require information about completing and lodging this form, please go to  
www.fwa.gov.au or call 1300 799 675.]*

#### **Respondent (Employer)**

**Legal name:**

**Trading name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Email:**

**Telephone:**

**Contact number for telephone conciliation (if different from above):**

**Fax:**

**Mobile:**

#### **Respondent's representative (if any)**

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Email:**

**Telephone:**

**Fax:**

**Mobile:**

#### **1.     What was the Applicant's period of employment?**

---

**If you disagree with the period of employment specified in the Application for Unfair Dismissal Remedy, please provide the following information:**

Date employed:

Date notified of dismissal:

Date dismissal took effect:

**2. What were the reasons for dismissal?**

*[Using numbered paragraphs, briefly specify the reasons for dismissing the Applicant. Attach any letter of dismissal and/or separation certificate.]*

**3. What is your response to the Applicant's contentions?**

*[Using numbered paragraphs, briefly set out your response to the Applicant's contentions as to why the dismissal was unfair.]*

**4. Do you have any jurisdictional or other objection(s) to the application?**

*[Using numbered paragraphs, set out any jurisdictional or other objection(s) you have to the application and specify briefly the ground(s) and particulars for each objection. See the guide accompanying this form or go to <http://www.fwa.gov.au/index.cfm?pagename=dismissalsprocess> for more information on the objections available under the Fair Work Act.*

*Note: It is **not** necessary to specify as an objection that the dismissal was fair.]*

**5. How many employees did you have at the earlier of either time: the time when the employee was given notice of the dismissal, or the time immediately before the dismissal?**

*[Go to [http://www.fwa.gov.au/documents/definition\\_small\\_business.pdf](http://www.fwa.gov.au/documents/definition_small_business.pdf) for information on calculating the number of employees.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This Response (including any supporting documentation accompanying the Response) must be lodged with FWA and served on the Applicant within 7 days of being served with the Form F2 application or in accordance with any instruction given by FWA.**

**Serving a document means giving a copy of the document to the person being served in a manner provided for in the *Fair Work***

***Australia Rules 2010. Rule 9 sets out the ways in which a document can be served. For example, you can serve the Applicant by sending the document by Express Post (retaining the sender's copy of the identifying barcode), registered post to the address specified for the Applicant in the application or by email to the email address for the Applicant specified in the application.***

### **External Research**

From time to time Fair Work Australia undertakes research with participants in unfair dismissal matters to ensure a high quality process. As some research may be undertaken by external providers on behalf of FWA, your contact details may be provided to an external provider for the purposes of inviting you to participate in research. Please mark the box below if you object to being contacted for the purposes of FWA research.

I object to being contacted for the purposes of FWA research

☐

---

## **Form F4     Objection to Application for Unfair Dismissal Remedy**

*(Rule 15, Fair Work Australia Rules 2010)*

### **IN FAIR WORK AUSTRALIA**

#### **FWA Matter No.: U**

*[Insert FWA matter number appearing on the main application form.]*

#### **Applicant (Employee):**

*[Insert name of employee from main application.]*

#### **Respondent (Employer):**

*[Insert name of employer.]*

### **OBJECTION TO APPLICATION FOR UNFAIR DISMISSAL REMEDY**

*[If you require information about completing and lodging this form, please go to [www.fwa.gov.au](http://www.fwa.gov.au) or call 1300 799 675.]*

The Respondent objects to the Application for Unfair Dismissal Remedy and seeks the dismissal of the application on the following ground(s):

*[Using numbered paragraphs, set out any jurisdictional or other objection(s) you have to the application and specify briefly the ground(s) and particulars for each objection. Go to <http://www.fwa.gov.au/index.cfm?pagename=dismissalsprocess> for more information on the objections available under the Fair Work Act.*

*Note: It is **not** necessary to specify as an objection that the dismissal was fair.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Lodged by the Respondent**

Address for Service:

Telephone:

Fax:

Email:

*[This information block should appear at the foot of the first page of this form and any witness statements, statutory declarations or submissions. This can be done, e.g., by using cut and paste once the document has been completed.]*

### **Service requirements**

**This form must be served on the Applicant as soon as practicable after it is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

---

## Form F5 Application for Security for Payment of Costs

*(Rule 16, Fair Work Australia Rules 2010)*

### IN FAIR WORK AUSTRALIA

#### **FWA Matter No.:**

*[Insert FWA matter number appearing on main application form.]*

#### **Applicant (Employee):**

*[Insert name of Applicant from main application.]*

#### **Respondent (Employer):**

*[Insert name of Respondent from main application.]*

### APPLICATION FOR SECURITY FOR PAYMENT OF COSTS

*Fair Work Act 2009—s.404*

**1. Party seeking security for costs order:**

*[Insert name of party seeking security for costs order.]*

**2. Person against whom security for costs order is sought:**

*[Insert name of party/person against whom security for costs order is sought.]*

**3. Grounds:**

*[Using numbered paragraphs, specify briefly the grounds on which the application for a security of payment of costs order is based. Attach additional pages if necessary.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

#### **Service requirements**

**This form must be served on the party against whom security for payment of costs is sought as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

---

## Form F6     Application for Costs

### IN FAIR WORK AUSTRALIA

#### **FWA Matter No.:**

*[Insert FWA matter number appearing on main application form.]*

#### **Applicant (Employee):**

*[Insert name of Applicant from main application.]*

#### **Respondent (Employer):**

*[Insert name of Respondent from main application.]*

### **APPLICATION FOR COSTS**

*Fair Work Act 2009—ss.376, 401, 611, 780*

**1.     Party applying for a costs order:**

*[Insert name of party applying for costs order.]*

**2.     Party/Person against whom a costs order is sought:**

*[Insert name of party/person against whom a costs order is sought.]*

**3.     Grounds:**

*[Using numbered paragraphs, specify briefly the grounds on which the application for a costs order is based. Attach additional pages if necessary.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

#### **Service requirements**

**This form must be served on the Respondent against whom the order is sought as soon as practicable after the form is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F7 Notice of Appeal

(Rule 12, Fair Work Australia Rules 2010)

### IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### NOTICE OF APPEAL

*Fair Work Act 2009—s.604*

#### Appellant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Appellant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Appellant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Appellant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### 1. Decision appealed:

The Appellant, being a person aggrieved, gives notice of an appeal against a decision made in a matter as follows:

Matter number:

*[FWA matter number of matter under appeal]*

Applicant:

*[Name of applicant(s) in matter under appeal]*

Respondent(s):

*[Name of respondent(s), if any, in matter under appeal]*

Decision maker:

[Name of member or delegate of FWA]

Decision appealed:

[Description of decision and order, if any, appealed and include decision citation (e.g. [2009] FWA 365) if known]

Date of decision:

[Date]

**2. Grounds:**

[Using numbered paragraphs, set out the grounds of appeal. In unfair dismissal appeals, grounds relating to “significant errors of fact” should be set out under a separate heading.]

Note: Pursuant to s.400(2) of the Act, an appeal from a decision made in relation to an unfair dismissal matter under Part 3-2 of the Act can only, to the extent that it is an appeal on a question of fact, be made on the ground that the decision involved a “significant error of fact”.

**3. Public interest in permitting the appeal:**

[Set out the matters that the appellant contends make it in the public interest for FWA to grant permission for the appeal.]

Note: s.400(1) prohibits FWA from granting permission for an appeal from a decision made under Part 3-2 of the Act relating to unfair dismissal unless FWA “considers that it is in the public interest to do so”.

**4. Stay under s.606:**

4.1 Is a stay of the decision sought?

[ ] Yes

[ ] No

4.2 If “Yes”, provide details:

[If a stay is sought, specify whether a stay is sought of the whole or part of the decision or order and, if a stay of part only is sought, specify that part.]

**5. Extension of time:**

If this Notice of Appeal is lodged later than 21 days after the decision or order under appeal was given or made, application should be made for an extension of time within which to institute this appeal.

5.1 Is an extension of time sought?

[ ] Yes

[ ] No

- 5.2      If “Yes”, provide details:  
            *[Using numbered paragraphs, set out the grounds on which it is claimed an extension of time should be granted.]*

<p><b>Date:</b></p> <p><b>Signature:</b></p> <p><b>Name:</b></p> <p><b>Capacity/Position:</b></p>
---

### **Service requirements**

**This Notice of Appeal must be served on the other parties to the matter at first instance as soon as practicable after this Notice is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F8 Application for FWA to Deal with a General Protections Dispute

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR FWA TO DEAL WITH A GENERAL PROTECTIONS DISPUTE

*Fair Work Act 2009—ss.365, 372*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Other parties to the dispute)

**Legal name:**

**Trading name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

<b>Telephone:</b>	<b>Mobile:</b>
<b>Fax:</b>	<b>Email:</b>

The Applicant applies to have FWA deal with a dispute over an alleged contravention of Part 3-1 of the *Fair Work Act 2009* by the Respondent.

**1. What is the industry of the employer?**

*[Specify industry.]*

**2. Alleged contravention(s) of Part 3-1:**

**2.1** Section(s) allegedly contravened:

*[List the section(s) of Part 3-1 that the Respondent is alleged to have contravened. See [www.fwa.gov.au/index.cfm?pagename=disputegeneral](http://www.fwa.gov.au/index.cfm?pagename=disputegeneral) for assistance in identifying the correct section(s).]*

**2.2** Description of alleged contravention(s):

*[Using numbered paragraphs, give a description of the relevant facts and circumstances and specify **how** you say the section(s) specified in 2.1 have been contravened by the actions or conduct of the Respondent. This should include your response to any reasons for dismissal given by the employer. Attach additional pages if necessary.]*

**3. Dismissal:**

**3.1** Did the alleged contravention involve the dismissal of the Applicant or, where the Applicant is an organisation, an employee whose industrial interests the organisation is entitled to represent?

☐ Yes  
☐ No

**3.2** If “Yes”:

- **Name of employee dismissed:** *[Insert name.]*
- **Date employed:** *[Insert date.]*
- **Date of dismissal:** *[Insert date.]*

**3.3** What were the reasons for termination, if any, given by the employer?

*[Using numbered paragraphs, specify briefly the reason(s), if any, given by the employer for the termination. **Attach** any letter of termination and/or separation certificate given by the employer.]*

---

**4. For the purposes of participating in a conciliation conference do you think you need an interpreter other than a family member or friend?**

- ☐ Yes — language: *[Insert your first language]*  
☐ No

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This form will be served upon the Respondent by FWA.**

**Notice to the Respondent**

**A Respondent must, within 7 days of being served with this application, lodge with FWA *and serve on the Applicant* a response to the application in accordance with Form F8A. A copy of that form can be downloaded at [www.fwa.gov.au](http://www.fwa.gov.au).**

*See next page for application fee details.*

### Application fee

The legislation requires a fee to be paid on lodgment of this application with Fair Work Australia unless such requirement is waived by the General Manager on grounds of financial hardship. The fee is adjusted automatically from time to time. The current amount of the fee and information on seeking a waiver can be obtained by contacting FWA on 1300 799 675 or at [www.fwa.gov.au](http://www.fwa.gov.au).

If an application is lodged at a FWA office, the fee can be paid by cash, cheque, money order or credit card (Visa or MasterCard).

If an application is lodged by mail, the fee can be paid by cheque, money order or credit card (in which case, provide credit card details below).

If an application is lodged by fax, the fee must be paid by credit card (provide credit card details below).

If an application is lodged by email or online in accordance with rule 7, **credit card details must not be provided on this form**. Payment of the fee can only be made via FWA's eFiling facility at [www.fwa.gov.au](http://www.fwa.gov.au).

☐ **cash**

☐ **cheque/money order** (to be made payable to: Collector of Public Monies, FWA)

☐ **Visa**

☐ **MasterCard**

**Card number:** \_\_\_\_\_

**Card expiry date:** \_\_\_\_ / \_\_\_\_

**Cardholder's name:**

.....

**Signature:**

.....

Any refund of the application fee will be forwarded to the Applicant at the address on the application form.

---

*FWA use only*

FWA Matter No.: .....

Receipt No.: ..... / Credit Transaction

Processed by: .....

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS

---

## **Form F8A Employer's Response to Application for FWA to Deal with a General Protections Dispute**

*(Rule 16A Fair Work Australia Rules 2010)*

### **IN FAIR WORK AUSTRALIA**

#### **FWA Matter No: C**

*[Insert FWA matter number appearing on the main application form.]*

#### **Applicant:**

*[Insert name of Applicant from main application.]*

#### **Respondent:**

*[Insert name of Respondent from main application. If that name is incorrect, insert correct name below.]*

### **EMPLOYER'S RESPONSE TO APPLICATION FOR FWA TO DEAL WITH A GENERAL PROTECTIONS DISPUTE**

#### **Respondent (Employer)**

**Legal name:**

**Trading name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### **Respondent's representative (if any)**

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

1. **Do you agree with the information given in items 1 and 3 of the Form F8 application to which you are responding?**  
☐ Yes  
☐ No
2. **If "No", please provide what you contend is the correct information.**
3. **What is your response to the alleged contravention?\***  
*[Using numbered paragraphs, briefly specify your response to the contraventions alleged in item 2 of the application.]*
4. **If the Applicant alleges a dismissal, what were the reasons for dismissal?\***  
*[Using numbered paragraphs, briefly specify the reasons. Attach any letter of dismissal and/or separation certificate.]*
5. **If the Applicant does not allege a dismissal, does the Respondent agree to participate in a conference to deal with the dispute? (see s.374 of the *Fair Work Act 2009*)**  
☐ Yes  
☐ No

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

\*An employer is not required to provide a response to questions 3 and 4 if the employer is concerned that the response may be self-incriminating.

#### **Service requirements**

**This Response (including any supporting documentation accompanying the Response) must be lodged with FWA and served on the Applicant within 7 days of being served with the Form F8 application or in accordance with any instruction given by FWA.**

**Serving a document means giving a copy of the document to the person being served in a manner provided for in the *Fair Work Australia Rules 2010*. Rule 9 sets out the ways in which a document can be served. For example, you can serve the Applicant by sending the document by Express Post (retaining the sender's copy of the identifying barcode), registered post to the address specified for the**

**Applicant in the application or by email to the email address for the  
Applicant specified in the application.**

## Form F9 Application for FWA to Deal with an Unlawful Termination Dispute

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR FWA TO DEAL WITH AN UNLAWFUL TERMINATION DISPUTE

*Fair Work Act 2009—s.773*

*[If you require information about completing and lodging this form, please go to [www.fwa.gov.au](http://www.fwa.gov.au) or call 1300 799 675.]*

#### Applicant (Employee/Industrial Association)

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent (Employer)

**Legal name:**

**Trading name:**

**ABN:** *[If known]*

**Address:**

<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

The Applicant applies for FWA to deal with a dispute involving an allegation that the employment of the Applicant, or an employee whose industrial interests the Applicant is entitled to represent, was terminated in contravention of s.772(1).

- 1. What is the industry of the employer?**  
[Specify industry.]
- 2. If the Applicant is not the employee that was terminated, what is the name of the employee whose employment was terminated?**
- 3. What was the date of termination?**
- 4. For the purposes of participating in a conciliation conference do you think you need an interpreter other than a family member or friend?**  
☐ Yes — language: *[Insert your first language.]*  
☐ No
- 5. What were the reasons for termination, if any, given by the employer?**  
*[Using numbered paragraphs, specify briefly the reason(s), if any, given by the employer for the termination. Attach any letter of termination and/or separation certificate given by the employer.]*
- 6. What is the alleged contravention of s.772(1)?**  
*[Using numbered paragraphs, give a description of the relevant facts and circumstances and specify **how** you say the termination involved a contravention of s.772(1). This should include your response to any reasons for dismissal given by the employer. Attach additional pages if necessary.]*
- 7. Section 723 provides that a person must not make an unlawful termination application in relation to conduct if the person is able to make a general protections court application in relation to the conduct (see Division 8 of Part 3-1). Do you consider that you cannot make a general protections court application?**  
☐ Yes  
☐ No

**Date:**  
**Signature:**  
**Name:**  
**Capacity/Position:**

**Service requirements**

**This form will be served on the Respondent by FWA.**

**Notice to the Respondent**

**A respondent must, within 7 days of being served with this application, lodge with FWA *and serve on the Applicant* a response to the application in accordance with Form F9A. A copy of that form can be downloaded at [www.fwa.gov.au](http://www.fwa.gov.au).**

*See next page for application fee details.*

### Application fee

The legislation requires a fee to be paid on lodgment of this application with Fair Work Australia unless such requirement is waived by the General Manager on grounds of financial hardship. The fee is adjusted automatically from time to time. The current amount of the fee and information on seeking a waiver can be obtained by contacting FWA on 1300 799 675 or at [www.fwa.gov.au](http://www.fwa.gov.au).

If an application is lodged at a FWA office, the fee can be paid by cash, cheque, money order or credit card (Visa or MasterCard).

If an application is lodged by mail, the fee can be paid by cheque, money order or credit card (in which case, provide credit card details below).

If an application is lodged by fax, the fee must be paid by credit card (provide credit card details below).

If an application is lodged by email or online in accordance with rule 7, **credit card details must not be provided on this form**. Payment of the fee can only be made via FWA's eFiling facility at [www.fwa.gov.au](http://www.fwa.gov.au).

☐ **cash**

☐ **cheque/money order** (to be made payable to: Collector of Public Monies, FWA)

☐ **Visa**

☐ **MasterCard**

**Card number:** \_\_\_\_\_

**Card expiry date:** \_\_\_\_ / \_\_\_\_

**Cardholder's name:**

.....

**Signature:**

.....

Any refund of the application fee will be forwarded to the Applicant at the address on the application form.

*FWA use only*

FWA Matter No.: .....

---

Receipt No.: ..... / Credit Transaction  
Processed by: .....

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS

## **Form F9A Employer's Response to Application for FWA to Deal with an Unlawful Termination Dispute**

*(Rule 16AA Fair Work Australia Rules 2010)*

### **IN FAIR WORK AUSTRALIA**

#### **FWA Matter No: C**

*[Insert FWA matter number appearing on the main application form.]*

#### **Applicant:**

*[Insert name of Applicant from main application.]*

#### **Respondent:**

*[Insert name of Respondent from main application. If that name is incorrect, insert correct name below.]*

### **EMPLOYER'S RESPONSE TO APPLICATION FOR FWA TO DEAL WITH AN UNLAWFUL TERMINATION DISPUTE**

#### **Respondent (Employer)**

<b>Legal name:</b>		
<b>Trading name:</b>		
		<b>ABN:</b>
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

#### **Respondent's representative (if any)**

<b>Name:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

- 1. Do you agree with the information given in items 1, 2 and 3 of the Form F9 application to which you are responding?**

- ☐ Yes  
☐ No

2. If "No", please provide what you contend is the correct information:
3. What were the reasons for dismissal?  
*[Using numbered paragraphs, briefly specify the reasons. Attach any letter of dismissal and/or separation certificate.]*
4. What is your response to the alleged contravention(s) of s.772(1)?\*  
*[Using numbered paragraphs, briefly specify your response to the contraventions alleged in item 6 of the application.]*

Date:  
Signature:  
Name:  
Capacity/Position:

\*An employer is not required to provide a response to question 4 if the employer is concerned that the response may be self-incriminating.

#### Service requirements

**This Response (including any supporting documentation accompanying the Response) must be lodged with FWA and served on the Applicant within 7 days of being served with the Form F9 application or in accordance with any instruction given by FWA.**

**Serving a document means giving a copy of the document to the person being served in a manner provided for in the *Fair Work Australia Rules 2010*. Rule 9 sets out the ways in which a document can be served. For example, you can serve the Applicant by sending the document by Express Post (retaining the sender's copy of the identifying barcode), registered post to the address specified for the Applicant in the application or by email to the email address for the Applicant specified in the application.**

## Form F10 Application for FWA to Deal with a Dispute in Accordance with a Dispute Settlement Procedure

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR FWA TO DEAL WITH A DISPUTE IN ACCORDANCE WITH A DISPUTE SETTLEMENT PROCEDURE

*Fair Work Act 2009—s.739 etc.\**

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Party/Parties with whom the Applicant is in dispute)

**Name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

[If known]

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. What is the industry of the employer?**

[Specify industry.]

**2. Relevant instrument:**

The dispute is referred to FWA pursuant to a dispute settlement procedure in:

• **Name of instrument:**

[Also include any ID/Code No. if known.]

• **Type of instrument:**

[Tick the appropriate box.]

☐ modern award;

☐ enterprise agreement (made under the *Fair Work Act 2009* after 1 July 2009);

☐ workplace agreement (made under the *Workplace Relations Act 1996* after 26 March 2006);

☐ certified agreement (made under the *Workplace Relations Act 1996* on or before 26 March 2006);

☐ AWA, ITEA or an individual preserved state agreement;

☐ contract of employment or other written agreement with a procedure for dealing with disputes in relation to the NES or a safety net contractual entitlement;

☐ other (please specify):

Please **attach** a copy of the dispute settlement procedure.

**3. Clauses to which the dispute relates:**

[List the clause(s) in the relevant instrument (and, if also relevant, the NES) to which the dispute relates.]

**4. What is the dispute about?**

[Using numbered paragraphs, set out a description of what the dispute is about, including by reference to the clauses set out above.]

**5. Does this application relate to a refusal by an employer of a request by an employee for flexible working arrangements?**

☐ Yes  
☐ No

**6. Does this application relate to a refusal by an employer of a request by an employee for extension of unpaid parental leave?**

☐ Yes  
☐ No

**7. Relief sought:**

*[If FWA has a power of arbitration, specify the determination(s) sought.]*

**8. Steps already taken under dispute settlement procedure:**

*[Set out, in chronological order, the steps already taken (if any) under the dispute settlement procedure.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application (including any supporting documentation lodged with the application) must be served on the named Respondent(s) to the dispute as soon as practicable after the document is lodged with FWA.**

**Serving a document means giving a copy of the document to the person being served in a manner provided for in the *Fair Work Australia Rules 2010*. Rule 9 sets out the ways in which a document can be served. For example, to serve a company it is sufficient if a copy of the documents is sent by Express Post (retaining the sender's copy of the identifying barcode), registered post or delivered by hand, to the company's registered office or its principal place of business.**

---

\*This form should also be used for an application for FWA to deal with a dispute in accordance with a dispute resolution procedure in an agreement made under the *Workplace Relations Act 1996* and other transitional instruments (see Schedule 19 of the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*).

## Form F11 Application for FWA to Deal with a Bargaining Dispute

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR FWA TO DEAL WITH A BARGAINING DISPUTE

*Fair Work Act 2009—s.240*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Bargaining representative(s) with whom the Applicant is in dispute)

**Name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

*[If known]*

<b>Telephone:</b>	<b>Mobile:</b>
<b>Fax:</b>	<b>Email:</b>

### Other bargaining representatives

<b>Name:</b>		
<b>ABN:</b> <i>[If known]</i>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b> <i>[If known]</i>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

- 1. What is the industry of the employer?**  
*[Specify industry.]*
- 2. Course of bargaining:**  
*[Give a brief description of the course of bargaining to date including when bargaining commenced. **Attach** any notices issued during the course of the bargaining.]*
- 3. What are the main matters in dispute?**  
*[Briefly describe the main matters that remain in dispute.]*
- 4. Other proceedings before FWA:**  
*[List the FWA matter number of any proceedings that have already been before FWA in relation to the present bargaining.]*

<b>Date:</b>
<b>Signature:</b>
<b>Name:</b>
<b>Capacity/Position:</b>

### **Service requirements**

**This application must be served on the other party/parties to the dispute and all other bargaining representatives as soon as practicable after the application is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F12 Application for FWA to Deal with a Right of Entry Dispute

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR FWA TO DEAL WITH A RIGHT OF ENTRY DISPUTE

*Fair Work Act 2009—s.505*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s)

**Name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

*[If known]*

**Telephone:**

**Mobile:**

<b>Fax:</b>	<b>Email:</b>
-------------	---------------

**1. What is the industry of the employer?**

*[Specify industry.]*

**2. Capacity in which the Applicant applies:**

- ☐ a permit holder;
- ☐ a permit holder's organisation;
- ☐ an employer;
- ☐ an occupier of premises.

**3. What is the dispute about?**

*[Give a brief summary of what the dispute is about. Include reference to the specific provision(s) of Part 3-4 of the Act the operation of which is in dispute.]*

**4. Orders sought:**

*[Set out the orders sought including any order(s) of the sort specified in s.505(2).]*

**5. Grounds:**

*[Using numbered paragraphs, set out the grounds, including particulars, upon which the Applicant relies in seeking such relief.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application must be served on the named Respondent(s) as soon as practicable after the application is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F13 Application for FWA to Deal with a Stand Down Dispute

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR FWA TO DEAL WITH A STAND DOWN DISPUTE

*Fair Work Act 2009—s.526*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s)

**Name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

*[If known]*

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

- 1. What is the industry of the employer?**  
[Specify industry.]
  
- 2. Capacity in which the Applicant applies:**  
[Specify, by reference to the categories in s.526(3), the capacity in which the Applicant applies.]
  
- 3. What is the dispute about?**  
[Give a brief summary of what the dispute is about. Include reference to the specific provision(s) of Part 3-5 of the Act the operation of which is in dispute.]
  
- 4. Order(s) sought:**  
[Set out the terms of the order(s) sought.]
  
- 5. Grounds:**  
[Using numbered paragraphs, set out the grounds, including particulars, upon which the Applicant relies in seeking such order(s).]

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

### Service requirements

**This application must be served on the named Respondent(s) as soon as practicable after the application is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F14 Application for an Order to Stop etc. (Unprotected) Industrial Action

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR AN ORDER TO STOP ETC. (UNPROTECTED) INDUSTRIAL ACTION

*Fair Work Act 2009—ss.418, 419*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### 1. Application is made under:

☐ s.418(2)(b);

☐ s.419(2)(b).

#### 2. What is the industry of the employer?

*[Specify industry.]*

**3. Persons against whom order(s) sought:**

*[List the persons, including organisations (and their contact details if known) that the Applicant seeks to be bound by the orders sought. Employees may be listed by name or by describing a class of employees to be bound by the order.]*

**4. Grounds:**

*[Using numbered paragraphs, set out the grounds on which the application is made, including details of:*

- the industrial action which is happening, or is threatened, impending or probable or is being organised; and*
- how the Applicant is a person affected, or likely to be affected (directly or indirectly), by the industrial action.]*

**5. Order(s) sought:**

*[Set out, or attach as a separate document, draft orders. An electronic copy of this application and any separate draft order should be sent by email to the chambers of the member who lists the matter for hearing.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application must be served on any person who will be bound by the orders sought as soon as is practicable after it is lodged with FWA.**

Note: Rules 9 and 10 deal with service. It is open to an applicant to seek an order for substituted service (see rule 10) to avoid the need to individually serve employees who would be bound by the order(s) sought.

## Form F16 Application for Approval of Enterprise Agreement

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR APPROVAL OF ENTERPRISE AGREEMENT

*Fair Work Act 2009—s.185*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Is the Applicant?

- ☐ the employer;  
☐ an employee organisation which was a bargaining representative;  
☐ a bargaining representative appointed by the employer;  
☐ a bargaining representative appointed by an employee;  
☐ other (please specify):

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. Is the enterprise agreement:**

- ☐ a single-enterprise agreement;  
☐ a multi-enterprise agreement.

**2. What is the full and precise name of the agreement?**

**3. Employer**

- 3.1 If the Applicant is not the employer, please provide details of the employer to be covered by the agreement:

**Legal name:**

**Trading name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

Contact details for the Employer or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

*[If the agreement is a multi-enterprise agreement, please include additional boxes or attach a separate sheet identifying each employer covered by the agreement. All of the above details must be provided for each employer.]*

- 3.2 What is the industry of the employer?

*[Specify industry.]*

**4. Bargaining Representative—Employer**

Did the employer appoint a bargaining representative? (s.176(1)(d))

- ☐ Yes  
☐ No

If “Yes”, provide details of that bargaining representative:

**Name:**

**Address:**

<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b> [if applicable]		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

**5. Bargaining representative(s)—Union(s)**

Were any employee organisations (unions) bargaining representatives for the agreement? (s.176(1)(b) and (3))

- ☐ Yes  
☐ No

If “Yes”, provide details of that bargaining representative:

<b>Employee Organisation 1</b>		
<b>Name:</b>		
		<b>ABN:</b> [If known]
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

*[If more than one employee organisation was a bargaining representative, please include additional boxes or attach a separate sheet identifying each of the employee organisations which were bargaining representatives for the agreement. Please provide all of the details identified above for each such organisation.]*

**6. Bargaining Representatives—Employees**

6.1 How many instruments of appointment signed by an employee or employees appointing a bargaining representative were given to the employer? (s.176(1)(c) and (4), s.178(2)(a))

6.2 If one or more such instruments were given to the employer, please provide details of each such bargaining representative who is not a union specified above:

<b>Name:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>

**Contact person:** [if applicable]

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

*[Please include additional boxes or attach a separate sheet identifying each of the (non-union) employee bargaining representatives for the agreement. Please provide all of the details identified above for each such bargaining representative.]*

## 7. Other

- 7.1 Are the substantive provisions, or most of the substantive provisions, of the agreement based on a template other than an existing agreement applying to the employer?

☐ Yes

☐ No

If “Yes”, please provide details of the source of the template:

- 7.2 Is the Applicant or the Applicant’s representative aware of other agreement(s) in identical or substantially identical terms having been dealt with by FWA?

☐ Yes

☐ No

If “Yes”, please provide information that would assist in identifying such agreement(s) (e.g. identification number and date of FWA’s decision, the name of such agreement, the name of the member of FWA who dealt with such agreement or the name of the employer covered by such agreement):

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

## Service requirements

**A copy of this application must be served on each employer covered by the agreement, each employee organisation that was a bargaining representative and any other employee bargaining representative of which the Applicant is aware, as soon as practicable after the application is lodged.**

---

**A copy of this application must also be brought to the attention of employees covered by the agreement through the usual means adopted by the employer(s) for communicating with employees e.g. posting on employee notice boards or by email to employees where this is the usual method.**

Note: Rules 9 and 10 deal with service.

### **Other requirements**

The application must be accompanied by declarations completed by an officer or employee of each employer covered by the agreement and an officer or employee of each employee organisation which was a bargaining representative for the agreement and which support the application. These declarations may be found at:

- Form F17 for employer declarations; and
- Form F18 for employee organisation declarations.

When lodging this application, the application must be accompanied by:

- a signed copy of the agreement (see s.185(2)(a)); and
- sufficient additional copies to enable a copy to be provided to each bargaining representative in the event of approval by FWA.

Note: A copy of an enterprise agreement is a signed copy only if:

- (a) it is signed by:
  - (i) the employer covered by the agreement; and
  - (ii) at least 1 representative of the employees covered by the agreement; and
- (b) it includes:
  - (i) the full name and address of each person who signs the agreement; and
  - (ii) an explanation of the person's authority to sign the agreement.

(See reg. 2.06A of the *Fair Work Regulations 2009*.)

---

## **Form F17 Employer's Declaration in Support of Application for Approval of Enterprise Agreement**

### **IN FAIR WORK AUSTRALIA**

#### **FWA Matter No.:**

*[Insert FWA matter number appearing on the main application form, if known.]*

#### **Applicant:**

*[Insert name of Applicant from main application.]*

### **EMPLOYER'S DECLARATION IN SUPPORT OF APPLICATION FOR APPROVAL OF ENTERPRISE AGREEMENT**

*Fair Work Act 2009—s.185*

Note: This declaration must be made by an officer or employee of the employer.

I,

*[name]*

Of

*[address]*

*[occupation]*

Make the following declaration under the *Statutory Declarations Act 1959*:

#### **Part 1: Preliminary**

1.1 Full and precise name of Agreement:

1.2 Legal name of Employer:

1.3 Trading name of Employer (if different):

1.4 Are you aware of other agreement(s) in identical or substantially identical terms having been dealt with by FWA?

☐ Yes

☐ No

If "Yes", please provide information that would assist in identifying such agreement(s) (e.g. identification number and date of FWA's decision, the name of such agreement, the name of the member of FWA who dealt with such agreement or the name of the employer covered by such agreement):

1.5 Has a scope order or a low-paid authorisation been issued in relation to the Agreement?

☐ Yes

☐ No

If "Yes", please provide the unique print number and date of the order:

PR \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Part 2: Requirements for approval

### Nominal Expiry Date (s.186(5))

- 2.1 What is the nominal expiry date of the Agreement and the clause number of the clause that specifies that date: (s.186(5))?

### Scope of the Agreement (s.186(3) and (3A))

- 2.2 Does the Agreement cover all employees of the Employer (other than senior executives)?

☐ Yes

☐ No

- 2.3 If "No", specify the group(s) of employees covered by the Agreement and how FWA can be satisfied that such group(s) were fairly chosen, including, if appropriate, by reference to the geographical, operational or organisational distinctness of such group(s): (s.186(3) and (3A)):

### Agreement Genuinely Approved - (s.186(2)(a), s.188, s.180(2), (3) and (5), s.181)

- 2.4 Did the employer take all reasonable steps to give notice of the right to be represented by a bargaining representative to each employee who will be covered by the Agreement as required by s. 173?

☐ Yes

☐ No

If "Yes", please attach a copy of the notice given to employees and explain the steps taken:

*Note* The notice required by s. 173 must meet the relevant requirements of s. 174. A form of notice has been prescribed and can be found in Schedule 2.1 to the *Fair Work Regulations 2009* at <http://www.comlaw.gov.au/Series/F2009L02356>.

- 2.5 Please specify the steps taken by the employer to ensure that the relevant employees were given, or had access to, the written text of the Agreement and any other material incorporated by reference into the Agreement during the 7 day period ending immediately before the start of the voting process (s.180(2)(a)):

2.6 Please specify the steps taken by the employer (including the date of each such step) to notify all relevant employees of the time and place at which the vote was to occur and the voting method to be used (s.180(3)):

2.7 Please specify the steps taken by the employer to explain the terms of the Agreement, and the effect of those terms, to relevant employees (s.180(5)):

*[Note: Your answer must include information on the manner in which the explanation took account of particular circumstances and needs of the relevant employees. (e.g., where the employees were from a non-English speaking background, were young employees or did not have a bargaining representative).]*

2.8 Please provide the following dates:

Date on which the last notice of representational rights was given to an employee who will be covered by the Agreement (s.181(2)):	
Date on which voting for the Agreement commenced (voting commences on the first day that an employee is able to cast a vote — see s.181):	
Date on which the Agreement was made (that is, the date on which the voting process by which employees approved the agreement concluded — see s.182):	

If the date on which the Agreement was made is more than 14 days before the date on which application for approval of the Agreement was lodged, please provide details of the circumstances which FWA should take into account in deciding if it is fair to extend the time for lodging the application (s.185(3)(b)):

2.9 Please provide the following details of the vote on the Agreement:

Number of employees who will be covered by the Agreement:	
Number of employees who cast a valid vote:	
Number of employees who voted to approve the Agreement:	

### **Interaction with National Employment Standards (s.186(2)(c))**

2.10 Please list any terms of the Agreement that exclude in whole, or in part, the National Employment Standards:

2.11 Please identify any terms of the Agreement that are detrimental to an employee in any respect when compared to the National Employment Standards:

### Unlawful Terms (s.186(4))

- 2.12 Does the Agreement contain any terms that deal with the rights of officials or employees of employee organisations to enter the employer's premises? (s.186(4) and s.194(f) and (g))

☐ Yes  
☐ No

If "Yes", please specify the term(s):

- 2.13 Does the Agreement contain any:

- discriminatory terms? (s.186(4) and s.194(a), s.195);
- objectionable terms? (s.186(4) and s.194(b), definition in s.12);
- terms that deal with the rights of employees in relation to unfair dismissal? (s.186(4) and s.194(c) and (d));
- terms that deal with the taking of industrial action that are inconsistent with Part 3-3 of Chapter 3 of the Act? (s.186(4) and s.194(e)); or
- designated outworker terms? (s.186(4A))

☐ Yes  
☐ No

### Required terms

- 2.14 Please specify the clause number of the following required terms:

Dispute Resolution Procedure (s.186(6)):	
Flexibility Term (s.202(1), s.203):	
Consultation Term (s.205(1)):	

### Particular types of workers

- 2.15 Does the Agreement cover any shiftworkers? (s.196)

☐ Yes  
☐ No

If "Yes", please identify the clause, if any, that defines or describes an employee as a shiftworker for the purposes of the National Employment Standards:

- 2.16 Does the Agreement:

- cover any pieceworkers (s.197); or
- contain terms providing for school-based apprentices or trainees to receive loadings in lieu of paid leave (s.199); or
- cover any outworkers (s.200)?

☐ Yes  
☐ No

---

If "Yes", please identify the relevant clause(s):

### Part 3: Better Off Overall Test

*[FWA must apply the better off overall test to the agreement by reference to relevant instrument(s): see s.193 of the Fair Work Act 2009 and item 18 in Schedule 7 to the Fair Work (Transitional Provisions and Consequential Amendments) Act 2009.*

*It is essential that you set out the names of any modern award(s) or award-based transitional instrument(s) — typically pre-reform award(s) or NAPSAs — accurately in full and include the "MA", "AP" or "AN" number of each such instrument. These numbers can be located via a title search on the "Find an award" search facility at:*

*<http://www.fwa.gov.au/index.cfm?pagename=awardsfind>.*

*Under the legislative scheme an award will not **apply** to employees if a statutory collective agreement is in place. However, an award that would apply in the absence of such an agreement will still **cover** those employees.]*

#### Reference instrument(s)

**3.1 Relevant modern award(s)**

List the modern award(s), if any, that currently cover the employer in relation to any employees covered by this Agreement:

**3.2 Relevant pre-reform award(s)/NAPSA(s)**

List the pre-reform award(s) or NAPSA(s), if any, that covered the employer in relation to any employees covered by this Agreement as at 31 December 2009:

#### Translating classifications

- 3.3** If the classifications in the Agreement are different from the classifications in any of the reference instrument(s) listed in questions 3.1 and 3.2, please attach a table that identifies how classifications in the Agreement relate to classifications in the reference instrument(s).

#### Improvements/reductions

- 3.4** Does the Agreement contain any terms or conditions of employment that are *more beneficial* than equivalent terms and conditions in the reference instrument(s) listed in questions 3.1 and 3.2 or does the Agreement confer any entitlements that are not conferred by those reference instrument(s)?

☐ Yes

☐ No

- 3.5** If "Yes", identify the terms and conditions in the Agreement that:

- (a) are more beneficial than the reference instrument(s),
- (b) are not conferred by the reference instrument(s),

together with the employees affected and the relevant terms of the reference instrument(s):

- 3.6 Does the Agreement contain any terms or conditions of employment that are *less beneficial* than equivalent terms and conditions in the reference instrument(s) listed in questions 3.1 and 3.2 or do those reference instrument(s) confer any entitlements that are not conferred by the Agreement?

☐ Yes

☐ No

- 3.7 If "Yes", identify the terms and conditions in the reference instrument(s) that:

- (a) are more beneficial than the Agreement; or  
(b) are not conferred by the Agreement,

together with the employees affected and, in the case of (a), the relevant terms of the Agreement:

[Note: your answers to 3.5 and 3.7 should indicate whether all or only some of the employees are affected and, if only some employees are affected, identify the group(s) of employees affected.]

#### Exceptional circumstances (agreement fails the better off overall test)

- 3.8 If the employer considers that the Agreement does not pass the better off overall test as set out at s.193 of the *Fair Work Act 2009* (and, possibly, item 18 of Schedule 7 to the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*), identify any exceptional circumstances that FWA should consider when deciding whether approving the Agreement would not be contrary to the public interest (s.189):

### Part 4: Statistical information

Note: The information in this part is necessary to enable Fair Work Australia to comply with its statutory reporting obligations.

- 4.1 Of the employees covered by the Agreement, how many employees are in the following demographic groups?

Group	Number of employees within group
Female	
Non-English speaking background	
Aboriginal or Torres Strait Islander	
Disabled	
Part-time	
Casual	
Under 21 years of age	
Over 45 years of age (mature age)	

- 4.2 In what State/Territory will the Agreement be in operation?

[Mark all applicable boxes with an "X".]

ACT ☐    NSW ☐    NT ☐    Qld ☐    SA ☐    Tas ☐    Vic ☐    WA ☐

4.3    Please list the full and precise name of all collective agreements (including any ID number, if known,) that covered any employees covered by this Agreement immediately prior to the time this Agreement was made:

4.4    What is the primary activity of the employer?  
[e.g. music retailer, plumbing contractor, steel fabricator.]

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

[Signature of person making the declaration.]

Declared at:  
[place]

On:  
[date]

Before me:  
[Signature of person before whom the declaration is made.]

[Set out the witness' full name, qualification to witness a statutory declaration and address (all in printed letters). Note: A statutory declaration must be made before a "prescribed person": s.8, *Statutory Declarations Act 1959 (Cth)*. For a full description of prescribed persons, go to [fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs](http://fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs).]

**Please provide your contact details for any future inquiries related to this declaration:**

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

---

**Form F18 Declaration of Employee Organisation in relation  
to an Application for Approval of Enterprise  
Agreement**

**IN FAIR WORK AUSTRALIA**

**FWA Matter No.:**

[Insert FWA matter number appearing on the main application form, if known.]

**Applicant:**

[Insert name of Applicant from main application.]

**DECLARATION OF EMPLOYEE ORGANISATION IN  
RELATION TO AN APPLICATION FOR APPROVAL OF  
ENTERPRISE AGREEMENT**

*Fair Work Act 2009—s.185*

I,

[name]

Of

[address]

[occupation]

Make the following declaration under the *Statutory Declarations Act 1959*:

1. **I am an officer of the [name of employee organisation] (the Union).**
2. **This declaration relates to an application for approval of an enterprise agreement (the Agreement), as follows:**  
**Name of Agreement:**  
**Name of Employer(s) to be covered by the agreement:**  
**FWA matter number of the Application for Approval:**
3. **The Union was a bargaining representative for the Agreement because one or more members of the Union are employees who are covered by the Agreement and the Union is entitled to represent the industrial interests of those employees in accordance with s.176(1)(b) of the *Fair Work Act 2009*.**
4. **The Union supports the approval of the Agreement by Fair Work Australia?**  
☐ Yes  
☐ No
5. **If the answer to question 4 is “No”, the grounds of objection raised by the Union are as follows:**  
[Using numbered paragraphs, set out the matters of disagreement. Attach additional pages if necessary or set out as an attachment.]

**6. I have read the employer's Form F17 statutory declaration in support of the Application. In so far as the matters contained in that statutory declaration are within my knowledge:**

☐ I agree with that statutory declaration.

☐ I disagree with one or more of the answers given to questions in the statutory declaration, or with other matters specified in the statutory declaration, as follows:

*[Using numbered paragraphs, set out the matters of disagreement. Attach additional pages if necessary or set out as an attachment.]*

**7. The Union gives notice pursuant to s.183 of the Fair Work Act 2009 that it wants to be covered by the Agreement?**

☐ Yes

☐ No

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

*[Signature of person making the declaration.]*

Declared at:

*[place]*

On:

*[date]*

Before me:

*[Signature of person before whom the declaration is made.]*

*[Set out the witness' full name, qualification to witness a statutory declaration and address (all in printed letters). Note: A statutory declaration must be made before a "prescribed person": s.8, Statutory Declarations Act 1959 (Cth). For a full description of prescribed persons, go to:*

*[fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs](http://fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs).]*

**Please provide your contact details for any future inquiries related to this declaration:**

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

---

### Service requirements

**This declaration must be served on the employer(s) to be covered by the Agreement and any other relevant bargaining representative known to the Union as soon as practicable after the document is lodged with FWA.**

Note 1: Rule 9 deals with service.

Note 2: An employee organisation that wants to be covered by the Agreement must lodge this declaration (with Question 7 answered 'Yes') with Fair Work Australia, or otherwise give notice in accordance with s.183 of the Act, before Fair Work Australia approves the Agreement.

## Form F19 Application for Approval of Greenfields Agreement

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR APPROVAL OF GREENFIELDS AGREEMENT

*Fair Work Act 2009—s.185*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**Is the Applicant?**

☐ an employer covered by the agreement;

☐ an employee organisation that is covered by the agreement.

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### 1. Is the greenfields agreement:

☐ a single-enterprise agreement;

☐ a multi-enterprise agreement.

2. What is the full and precise name of the agreement?

3. What is the industry of the employer?  
[Specify industry.]

4. Please provide details of the employer to be covered by the agreement:

Legal name:		
Trading name:		
		ABN:
Address:		
Suburb:	State:	Postcode:
Contact person:		
Telephone:	Mobile:	
Fax:	Email:	

[If the agreement is a multi-enterprise agreement, please include additional boxes or attach a separate sheet identifying each employer covered by the agreement. All of the above details must be provided for each employer.]

5. Please provide details of each employee organisation that is covered by the agreement:

Employee Organisation 1		
Name:		
		ABN: [If known]
Address:		
Suburb:	State:	Postcode:
Contact person:		
Telephone:	Mobile:	
Fax:	Email:	

[If the agreement covers more than one employee organisation, please include additional boxes for each organisation.]

Date:
Signature:
Name:

<b>Capacity/Position:</b>
---------------------------

### Service requirements

**A copy of this application must be served on each employer and each employee organisation covered by the agreement, as soon as practicable after the application is lodged.**

Note: Rules 9 and 10 deal with service.

### Other requirements

When lodging this application, the Applicant must ensure that it is accompanied by declarations completed by an officer or employee of each employer and an officer or employee of each employee organisation that the agreement is expressed to cover. These declarations may be found at:

- Form F20 for employer declarations; and
- Form F21 for employee organisation declarations.

When lodging this application, it must be accompanied by:

- a signed copy of the agreement (see s.185(2)(a)); and
- sufficient additional copies to enable a copy to be provided to each bargaining representative in the event of approval by FWA.

---

## Form F20 Employer's Declaration in Support of Application for Approval of Greenfields Agreement

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.:

[Insert FWA matter number appearing on the main application form, if known.]

#### Applicant:

[Insert name of Applicant from main application.]

### EMPLOYER'S DECLARATION IN SUPPORT OF APPLICATION FOR APPROVAL OF GREENFIELDS AGREEMENT

*Fair Work Act 2009—s.185*

Note: This declaration must be made by an officer or employee of the  
employer.

I,  
[name]

Of  
[address]

[occupation]

Make the following declaration under the *Statutory Declarations Act 1959*:

#### Part 1: About the greenfields business to be covered

- 1.1 What is the name of the agreement?
- 1.2 What is the name of the employer or employers to be covered by the agreement?
- 1.3 What is the name and address of each business of each employer covered by the agreement?
- 1.4 What kind of work will be done under the agreement?

- 1.5 Does the agreement cover a genuine new enterprise the employer is establishing or is proposing to establish?

☐ Yes  
☐ No

- 1.6 As at the date the agreement was made, had the employer employed any persons who will be necessary for the normal conduct of the new business and will be covered by the agreement?

☐ Yes  
☐ No

## **Part 2: Requirements for approval**

- 2.1 Please specify the date on which the agreement was made: (s.182(3))

- 2.2 If the agreement is a multi-enterprise agreement, has each employer who will be covered by the agreement genuinely agreed to the making of the agreement and done so free from coercion or threats of coercion to make the agreement?: (s.186(2)(b))

☐ Yes  
☐ No

- 2.3 Does the agreement cover all prospective employees of the employer or employers?

☐ Yes  
☐ No

- 2.4 If "No", please provide details of the geographical, operational or organisational basis for choosing the group(s) of prospective employees to be covered by the agreement: (s.186(3))

- 2.5 Are the employee organisations that will be covered by the agreement, taken as a group, entitled to represent the industrial interests of a majority of the employees who will be covered by the agreement, in relation to work to be performed under the agreement? (s.187(5)(a))

☐ Yes  
☐ No

- 
- 2.6 Please provide details of how the approval of the agreement would be in the public interest: (s.187(5)(b))
- 2.7 Please identify any terms of the agreement that deal with the matters contained in the National Employment Standards: (s.186(2)(c))
- 2.8 Please identify any terms of the agreement that exclude in whole, or in part, the National Employment Standards:
- 2.9 Please identify any terms of the agreement that are detrimental to an employee in any respect when compared to the National Employment Standards:
- 2.10 Does the agreement contain any discriminatory terms? (s.194(a))
- ☐ Yes  
☐ No
- If "Yes", please identify the relevant terms of the agreement:
- 2.11 Does the agreement contain any objectionable terms? (s.194(b))
- ☐ Yes  
☐ No
- If "Yes", please identify the relevant terms of the agreement:
- 2.12 Does the agreement contain any terms that deal with the rights of employees in relation to unfair dismissal? (s.194(c) and (d))
- ☐ Yes  
☐ No
- If "Yes", please identify the relevant terms of the agreement:

- 2.13 Does the agreement contain any terms that deal with the taking of industrial action and that are inconsistent with Part 3-3 of Chapter 3 of the Act? (s.194(e))

☐ Yes  
☐ No

If "Yes", please identify the relevant terms of the agreement:

- 2.14 Does the agreement contain any terms that deal with the rights of officials of organisations to enter the employer's premises? (s.194(f) and (g))

☐ Yes  
☐ No

If "Yes", please identify the relevant terms of the agreement:

- 2.15 Does the agreement contain any designated outworker terms? (s.186(4A))

☐ Yes  
☐ No

If "Yes", please identify the relevant terms of the agreement:

- 2.16 Please identify the term of the agreement which specifies the nominal expiry date of the agreement: (s.186(5))

- 2.17 Please identify the term of the agreement which specifies a procedure for FWA, or another independent person, to settle disputes about any matter arising under the agreement and any dispute in relation to the National Employment Standards: (s.186(6))

- 2.18 Does the term identified in question 2.17 allow for the representation of employees covered by the agreement for the purposes of the dispute settling procedure? (s.186(6))

☐ Yes

---

☐ No

2.19 Does the agreement cover any shiftworkers? (s.196)

☐ Yes

☐ No

If "Yes", please identify any terms of the agreement that describe the employees as shiftworkers:

2.20 Does the agreement cover any pieceworkers? (ss.197 and 198)

☐ Yes

☐ No

If "Yes", please identify any terms of the agreement that deal with entitlements of pieceworkers:

2.21 Does the agreement contain terms providing for school-based apprentices or trainees to receive loadings in lieu of paid leave? (s.199)

☐ Yes

☐ No

If "Yes", please identify any terms of the agreement that deal with such loadings:

2.22 Does the agreement cover employee outworkers? (s.200)

☐ Yes

☐ No

If "Yes", please identify any terms of the agreement that deal with entitlements of employee outworkers:

2.23 Please identify the flexibility term in the agreement: (ss.202, 203, 204)

2.24 Please identify the consultation term in the agreement: (s.205(1))

## Part 3: Comparison data

### Reference instrument(s)

*[FWA must apply the better off overall test to the agreement by reference to relevant instrument(s): see s.193 of the Fair Work Act 2009 and item 18 in Schedule 7 to the Fair Work (Transitional Provisions and Consequential Amendments) Act 2009. It is essential that you set out the names of any modern award(s) or award-based transitional instrument(s) — typically pre-reform award(s) or NAPSAs — accurately in full and include the “MA”, “AP” or “AN” number of each such instrument. These numbers can be located via a title search on the “Find an award” search facility at: <http://www.fwa.gov.au/index.cfm?pagename=awardsfind>.]*

- 3.1 List the modern award(s) and award-based transitional instrument(s) (e.g. pre-reform awards or NAPSAs), if any, that would cover or apply to the employer and the whole or any portion of the prospective employees to whom the agreement will apply:
- 3.2 If the classifications in the agreement are different from the classifications in any of the reference instrument(s) named in 3.1, please attach a table that identifies how classifications in the agreement relate to classifications in the reference instrument(s).

### Improvements/reductions

- 3.3 Does the agreement contain any terms or conditions of employment that are *less beneficial* than equivalent terms and conditions in the reference instrument(s) identified in questions 3.1 or 3.2?

☐ Yes  
☐ No

If “Yes”, identify the terms and conditions in the reference instrument(s) that are more beneficial than the agreement, the employees affected and the specific terms in the agreement that bring about the reductions:

*[Note: your answer must indicate whether all or only some of the prospective employees are affected and, if only some employees are affected, identify the group(s) of prospective employees affected.]*

- 3.4 Does the agreement contain any terms or conditions of employment that are *more beneficial* than equivalent terms and conditions in the reference instrument(s) identified in questions 3.1 or 3.2?

☐ Yes

☐ No

If "Yes", identify the terms and conditions in the reference instrument(s) that are less beneficial than the agreement, the employees affected and the specific terms in the agreement that bring about the improvements:

[Note: your answer must indicate whether all or only some of the prospective employees are affected and, if only some employees are affected, identify the group(s) of prospective employees affected.]

#### Part 4: Statistical information

- 4.1 In what State/Territory will the agreement be in operation?

[Mark all applicable boxes with an "X".]

ACT ☐ NSW ☐ NT ☐ Qld ☐ SA ☐ Tas ☐ Vic ☐ WA ☐

- 4.2 What is the primary activity of the employer?

[e.g. music retailer, plumbing contractor, steel fabricator.]

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

[Signature of person making the declaration.]

Declared at:

[place]

On:

[date]

Before me:

[Signature of person before whom the declaration is made.]

[Set out the witness' full name, qualification to witness a statutory declaration and address (all in printed letters). Note: A statutory declaration must be made before a

---

*“prescribed person”: s.8, Statutory Declarations Act 1959 (Cth). For a full description of prescribed persons, go to:  
<http://www.fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs.>]*

**Please provide your contact details for any future inquiries related to this declaration:**

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

---

**Form F21 Declaration of Employee Organisation in Support  
of Application for Approval of Greenfields  
Agreement**

**IN FAIR WORK AUSTRALIA**

**FWA Matter No.:**

*[Insert FWA matter number appearing on main application form, if known.]*

**Applicant:**

*[Insert name of Applicant from main application.]*

**DECLARATION OF EMPLOYEE ORGANISATION IN SUPPORT  
OF APPLICATION FOR APPROVAL OF GREENFIELDS  
AGREEMENT**

*Fair Work Act 2009—s.185*

I,  
*[name]*

Of  
*[address]*

*[occupation]*

Make the following declaration under the *Statutory Declarations Act 1959*:

1. **What is the name of the agreement?**
  
  
2. **What is the name of the employer or employers to be covered by the agreement?**
  
  
3. **Is your organisation entitled to represent the industrial interests of employees who will be covered by the agreement?**  
  

☐ Yes  
☐ No

- 4. Are the employee organisations that will be covered by the agreement, when taken as a group, entitled to represent the industrial interests of a majority of the employees who will be covered by the agreement, in relation to work to be performed under the agreement? (s.187(5)(a))**

☐ Yes

☐ No

- 5. Please provide details of how the approval of the agreement would be in the public interest: (s.187(5)(b))**

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

*[Signature of person making the declaration.]*

Declared at:

*[place]*

On:

*[date]*

Before me:

*[Signature of person before whom the declaration is made.]*

*[Set out the witness' full name, qualification to witness a statutory declaration and address (all in printed letters). Note: A statutory declaration must be made before a "prescribed person": s.8, Statutory Declarations Act 1959 (Cth). For a full description of prescribed persons, go to:  
<http://www.fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs.>]*

**Please provide your contact details for any future inquiries related to this declaration:**

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Telephone:**

**Mobile:**

---

**Fax:**

**Email:**

## Form F23 Application for Approval of Variation of Enterprise Agreement

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR APPROVAL OF VARIATION OF ENTERPRISE AGREEMENT

*Fair Work Act 2009—s.210*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**Is the Applicant?**

- ☐ an employer covered by the agreement;
- ☐ an employee organisation covered by the agreement;
- ☐ an employee covered by the agreement.

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

- 1. What is the full and precise name of the agreement that was varied?**  
*[Also include the Agreement ID/Code No. if known.]*

**2. If the applicant is not the employer, please provide details of the employer covered by the agreement:**

<b>Legal name:</b>		
<b>Trading name:</b>		
<b>ABN:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

*[If the agreement to be varied is a multi-enterprise agreement, please include additional boxes or attach a separate sheet identifying each of the employers which were bargaining representatives to the agreement. All of the above details must be provided for each employer.]*

**3. Please provide details of any employee organisations covered by the agreement:**

<b>Employee Organisation 1</b>		
<b>Name:</b>		
<b>ABN:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

*[If more than one employee organisation is covered by the agreement to be varied, please include additional boxes or attach a separate sheet identifying each employee organisation covered by the agreement. Please provide all of the details identified above for each organisation.]*

**4. Please specify the date on which the variation was made: (s.210(3)(a))**

**5. If the date specified in question 4 is more than 14 days before this application for approval of the variation was lodged, please provide details of the circumstances which you say FWA should take into account in deciding if it is fair to extend the time for lodging this application: (s.210(3)(b))**

<p><b>Date:</b></p> <p><b>Signature:</b></p> <p><b>Name:</b></p> <p><b>Capacity/Position:</b></p>
---

### Service requirements

**A copy of this application must be served on each employer and each employee organisation covered by the agreement, as soon as practicable after the application is lodged.**

Note: Rules 9 and 10 deal with service.

### Other requirements

The application must be accompanied by declarations completed by an officer or employee of each employer covered by the agreement and an officer or employee of each employee organisation which was a bargaining representative for the variation agreement and which supports the application. These declarations may be found at:

- Form 23A for employer declarations; and
- Form 23B for employee organisation declarations.

When lodging this application, the application must be accompanied by:

- a copy of the variation signed by each employer and each employee organisation covered by the variation agreement; and
- a copy of the agreement incorporating the proposed variations (with the variations highlighted).

Note: A copy of a variation to an enterprise agreement is a signed copy only if:

- (a) it is signed by:
  - (i) the employer covered by the agreement as varied; and
  - (ii) at least 1 representative of the employees covered by the agreement as varied; and
- (b) it includes:
  - (i) the full name and address of each person who signs the variation; and

---

(ii) an explanation of the person's authority to sign the variation.

(See reg. 2.09A of the *Fair Work Regulations 2009*.)

---

## Form F23A Employer's Declaration in Support of Approval of Variation of Enterprise Agreement

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### **FWA Matter No.:**

*[Insert FWA matter number appearing on main application form, if known.]*

### **Applicant:**

*[Insert name of Applicant from main application.]*

## **EMPLOYER'S DECLARATION IN SUPPORT OF APPLICATION FOR APPROVAL OF VARIATION OF ENTERPRISE AGREEMENT**

*Fair Work Act 2009—s.210*

I,  
*[name]*

Of  
*[address]*

*[occupation]*

Make the following declaration under the *Statutory Declarations Act 1959*:

### **Part 1: About the agreement**

- 1.1 What is the name of the agreement that was varied?
- 1.2 Is the agreement varying a single-enterprise agreement or a multi-enterprise agreement?
- ☐ single-enterprise agreement;  
☐ multi-enterprise agreement.
- 1.3 What is the name of the employer or employers to be covered by the agreement?

- 1.4 What is the name and address of the business or businesses of the employer or employers covered by the agreement?

## Part 2: Requirements for approval

- 2.1 Does the variation affect all employers covered by the agreement?

- ☐ Yes  
☐ No

If "No", please describe the employees affected by the variation and how FWA can be satisfied that such group(s) were fairly chosen, including by reference to the geographical, operational or organisational distinctness of such group(s): (s.211(3) and 186(2)(a))

- 2.2 What was the date on which the variation was made (that is, the date on which the voting process by which affected employees approved the variation) concluded? (s.208)

- 2.3 If the date specified in question 2.2 is more than 14 days before the application for approval of the variation was lodged, please provide details of the circumstances which FWA should take into account in deciding if it is fair to extend the time for lodging the application: (s.210(3)(b))

- 2.4 Please specify the steps taken by the employer to ensure that the affected employees were given, or had access to, the written text of the variation and any other material incorporated by reference in the variation during the 7 day period ending immediately before the start of the voting process: (ss.211(3) and 180 (2)(a))

- 2.5 Please specify the steps taken by the employer (at least 7 days before the start of the voting process) to notify all affected employees of the time and place at which the vote was to occur and the voting method to be used: (ss.211(3) and 180(3))

- 2.6 Please specify the steps taken by the employer to explain the terms of the variation, and the effect of those terms, to relevant employees: (ss.211(3) and 180(5))

*[Note: Your answer must include information on the manner in which the explanation took account of particular circumstances and needs of the affected employees (e.g., where the employees were from a non-English speaking background, were young employees or did not have a bargaining representative).]*

2.7 Please provide the following details of the vote on the variation:

Number of employees who are affected by the variation:	
Number of employees who cast a valid vote:	
Number of employees who voted to approve the variation:	

2.8 Please identify any terms of the variation that deal with the matters contained in the National Employment Standards:

2.9 Please identify any terms of the variation that exclude, in whole or in part, the National Employment Standards:

2.10 Please identify any terms of the variation that are detrimental to an employee in any respect when compared to the National Employment Standards:

### **Part 3: Comparison data**

#### **Reference instrument(s)**

3.1 List the modern award(s) and award-based transitional instrument(s) (e.g., pre-reform awards or NAPSAs), if any, that cover or apply to the employer and the whole or any portion of the employees to whom the variation will apply:

3.2 For the purposes of enabling FWA to apply the better off overall test in the context of transitional provisions in a modern award, list the award-based transitional instrument(s) (e.g., pre-reform awards or NAPSAs), if any, that covered the employer and the whole or any portion of the employees immediately before the commencement of any modern award referred to in 3.1:

- 3.3 If the classifications in the agreement are altered by the variation, please attach a table that identifies how classifications in the agreement as varied relate to classifications in the reference instrument(s) named in 3.1 and 3.2.

**Improvements/reductions**

- 3.4 Does the variation make any terms or conditions of employment *less beneficial* than they were before the agreement was varied?

☐ Yes  
☐ No

If "Yes", please identify how (including by reference to clause numbers in the variation and clause numbers in the agreement before it was varied):

- 3.5 Does the variation make any terms or conditions of employment *more beneficial* than they were before the agreement was varied?

☐ Yes  
☐ No

If "Yes", please identify how (including by reference to clause numbers in the variation and clause numbers in the agreement before it was varied):

- 3.6 Does the agreement as varied contain any terms or conditions of employment that are *less beneficial* than equivalent terms and conditions in the reference instrument(s) listed in questions 3.1 and 3.2?

☐ Yes  
☐ No

If "Yes", identify the terms and conditions in the reference instrument(s) that are more beneficial than the agreement and the specific terms in the agreement that bring about the reductions:

- 3.7 Does the agreement as varied contain any terms or conditions of employment that are *more beneficial* than equivalent terms and conditions in the reference instrument(s) listed in questions 3.1 and 3.2?

☐ Yes  
☐ No

If "Yes", identify the terms and conditions in the reference instrument(s) that are less beneficial than the agreement and the specific terms in the agreement that bring about the improvements:

## Part 4: Other

4.1 Of the employees affected by the variation, how many are in the following demographic groups?

Group	Number of affected employees within group
Female	
Non-English speaking background	
Aboriginal or Torres Strait Islander	
Disabled	
Part-time	
Casual	
Under 21 years of age	
Over 45 years of age (mature age)	

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

*[Signature of person making the declaration.]*

Declared at:  
*[place]*

On:  
*[date]*

Before me:  
*[Signature of person before whom the declaration is made.]*

*[Set out the witness' full name, qualification to witness a statutory declaration and address (all in printed letters). Note: A statutory declaration must be made before a "prescribed person": s.8, Statutory Declarations Act 1959 (Cth). For a full description of prescribed persons, go to:  
<http://www.fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs>.]*

---

**Please provide your contact details for any future inquiries related to this declaration:**

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

---

## Form F23B Declaration of Employee Organisation in Support of Application for Approval of Variation of Enterprise Agreement

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

**FWA Matter No.:**

*[Insert FWA matter number appearing on main application form, if known.]*

**Applicant:**

*[Insert name of Applicant from main application.]*

### **DECLARATION OF EMPLOYEE ORGANISATION IN SUPPORT OF APPLICATION FOR APPROVAL OF VARIATION OF ENTERPRISE AGREEMENT**

*Fair Work Act 2009—s.210*

I,  
*[name]*

Of  
*[address]*

*[occupation]*

Make the following declaration under the *Statutory Declarations Act 1959*:

1. The employee organisation on whose behalf I make this declaration (**Union**) is:
2. This declaration relates to a variation of the following enterprise agreement:
3. What is the name of the employer or employers covered by the agreement?
4. Was the Union a bargaining representative for one or more members of the Union who are also employees covered by the agreement as varied?

5. Is the Union entitled to represent the industrial interests of the employee or employees referred to in question 3 in relation to work that will be performed under the agreement as varied?

☐ Yes

☐ No

6. Have you read the statutory declaration lodged on behalf of the employer or employers?

☐ Yes

☐ No

7. In so far as the matters contained in the statutory declaration are within your knowledge, do you agree with the answers given to each question addressed in the statutory declaration?

☐ Yes

☐ No

8. If “No”, please identify the relevant statutory declaration and the question or questions and provide your answers:

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

*[Signature of person making the declaration.]*

Declared at:

*[place]*

On:

*[date]*

Before me:

*[Signature of person before whom the declaration is made.]*

*[Set out the witness' full name, qualification to witness a statutory declaration and address (all in printed letters). Note: A statutory declaration must be made before a “prescribed person”: s.8, Statutory Declarations Act 1959 (Cth). For a full description of prescribed persons, go to:*

*<http://www.fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs.>*]

**Please provide your contact details for any future inquiries related to this declaration:**

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

## Form F24 Application for Termination of Enterprise Agreement

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR TERMINATION OF ENTERPRISE AGREEMENT

*Fair Work Act 2009—ss.222, 225*

#### Applicant

**Legal name:**

**Trading name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**Is the Applicant:**

- ☐ an employer covered by the agreement;  
☐ an employee organisation covered by the agreement;  
☐ an employee covered by the agreement.

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. Application is made for:**

- ☐ termination of an enterprise agreement (s.222);
- ☐ termination of an enterprise agreement after its nominal expiry date (s.225).

**2. What is the full and precise name of the agreement to be terminated?**

*[Also include the Agreement ID/Code No. if known.]*

**3. What is the nominal expiry date of that agreement?**

**4. Please provide details of the employer covered by the agreement:**

**Legal name:**

**Trading name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

*[If the agreement is a multi-enterprise agreement, please include additional boxes or attach a separate sheet identifying each employer covered by the agreement. All of the above details must be provided for each employer.]*

**5. Please provide details of any employee organisations covered by the agreement:**

**Employee Organisation 1**

**Name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

---

*[If the agreement covers more than one employee organisation, please include additional boxes or attach a separate sheet identifying each employee organisation covered by the agreement. Please provide all of the details identified above for each organisation.]*

- 6. If this application is made under s.222 of the Act, please specify the date when the termination of this agreement was agreed to: (s.221)**
- 7. If the date specified in question 6 is more than 14 days before this application for termination of the agreement was lodged, please provide details of the circumstances FWA should take into account in deciding if it is fair to extend the date for lodging this application:**

<b>Date:</b> <b>Signature:</b> <b>Name:</b> <b>Capacity/Position:</b>
--

### **Evidence requirements**

If the application is made under s.222, this application must be accompanied by a statutory declaration made by an appropriate person authorised by the Applicant (an officer or employee of the employer or employee organisation as the case may be) demonstrating how each of the requirements in s.223 are satisfied.

### **Service requirements**

**A copy of this application must be served on each employer and each employee organisation covered by the agreement, as soon as practicable after the application is lodged.**

Note: Rules 9 and 10 deal with service.

## Form F25 Application to Vary Transitional Instrument to Remove Ambiguities etc.

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION TO VARY TRANSITIONAL INSTRUMENT TO REMOVE AMBIGUITIES ETC.

*Fair Work (Transitional Provisions and Consequential Amendments)  
Act 2009—item 10 of Schedule 3*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

- 1. What is the industry of the employer?**  
*[Specify industry.]*
- 2. What is the name of the transitional instrument?**  
*[Also include any ID/Code No. if known.]*

**3. Indicate the clauses of Schedule 3 to the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009* relied upon to make this application:**

- ☐ Schedule 3, item 10, paragraph 1(a);
- ☐ Schedule 3, item 10, paragraph 1(b);
- ☐ Schedule 3, item 10, paragraph 1(c).

**4. Variation(s) sought:**

*[Set out the terms of the variation(s) sought.]*

**5. Grounds:**

*[Using numbered paragraphs, set out the grounds upon which the Applicant relies in seeking the variation.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**A copy of this application must be served on all persons bound by, or parties to, the transitional instrument as soon as practicable after the application is lodged.**

Note: Rules 9 and 10 deal with service.

## Form F28 Application for Termination of Collective Agreement-based Transitional Instrument

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR TERMINATION OF COLLECTIVE AGREEMENT-BASED TRANSITIONAL INSTRUMENT

*Fair Work (Transitional Provisions and Consequential Amendments)*

*Act 2009—items 15 and 16 of Schedule 3*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### 1. Application is made under:

- ☐ subdivision C of Division 7 of Part 2-4 of the *Fair Work Act 2009* as it applies under item 15 of Schedule 3 of the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009* for approval for the termination of the abovementioned agreement;
- ☐ subdivision D of Division 7 of Part 2-4 of the *Fair Work Act 2009* as it applies under item 16 of Schedule 3 of the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009* for approval for

the termination of the abovementioned agreement after its nominal expiry date.

**2. What is the industry of the employer?**

*[Specify industry.]*

**3. What is the name of the collective agreement-based transitional instrument to be terminated?**

*[Also include any ID/Code No. if known.]*

**4. What is the nominal expiry date of the agreement?**

**5. Please provide details of the employer covered by the agreement:**

<b>Name:</b>		
<b>ABN:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

*[If the agreement is a multi-enterprise agreement, please include additional boxes or attach a separate sheet identifying each employer covered by the agreement. All of the above details must be provided for each employer.]*

**6. Please provide details of any employee organisations covered by the agreement:**

Employee Organisation 1		
<b>Name:</b>		
<b>ABN:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

---

*[If the agreement covers more than one employee organisation, please include additional boxes or attach a separate sheet identifying each employee organisation covered by the agreement. Please provide all of the details identified above for each organisation.]*

- 7. If this application is made under subdivision C of Division 7 of Part 2-4 of the Act, please specify the date when the termination of this agreement was agreed to: (s.221)**
- 8. If the date specified in question 7 is more than 14 days before this application for termination of the agreement was lodged, please provide details of the circumstances FWA should take into account in deciding if it is fair to extend the date for lodging this application:**

<b>Date:</b> <b>Signature:</b> <b>Name:</b> <b>Capacity/Position:</b>
--

### **Evidence requirements**

If the application is made under s.222 of the *Fair Work Act 2009* by virtue of the extended operation given by item 15 of Schedule 3 to the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009* (termination by agreement), this Application must be accompanied by a statutory declaration made by an appropriate person authorised by the Applicant (an officer or employee of the employer or employee organisation as the case may be) demonstrating how each of the requirements in s.223 are satisfied.

### **Service requirements**

**A copy of this application must be served on each employer and each employee organisation bound by the collective agreement-based transitional instrument as soon as practicable after the application is lodged.**

Note: Rules 9 and 10 deal with service.

## Form F29 Application for Approval of Termination of Individual Agreement-based Transitional Instrument

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR APPROVAL OF TERMINATION OF INDIVIDUAL AGREEMENT-BASED TRANSITIONAL INSTRUMENT

*Fair Work (Transitional Provisions and Consequential Amendments)*

*Act 2009—items 17 and 19 of Schedule 3*

(ITEAs, preserved individual State agreements, AWAs or Pre-reform AWAs)

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**Name of other party to agreement**

<b>Name:</b>		
<b>ABN:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

1. **Application is made for approval of the termination of an individual agreement-based transitional instrument under:**  
  

☐ item 17, Schedule 3 to the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*;  
  
☐ item 19, Schedule 3 to the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*.
2. **What is the industry of the employer?**  
[Specify industry.]
3. **What is the identification number or date of the agreement to be terminated?**  
[Insert the ID number and/or date.]
4. **What is the nominal expiry date of that agreement?**  
[Insert expiry date.]
5. **If a termination agreement has been made, was the employee under the age of 18 years at the time that termination agreement was made?**  
  

☐ Yes  
☐ No

<b>Date:</b>
<b>Signature:</b>
<b>Name:</b>
<b>Capacity/Position:</b>

---

## Service requirements

**The Applicant must serve a copy of this application on the other party to the individual agreement-based transitional instrument as soon as practicable after the application is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Other requirements

In relation to an application under item 17 of Schedule 3 of the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*, a copy of a written agreement (termination agreement) in accordance with subitem 17(1) should accompany the application.

In relation to an application under item 19 of Schedule 3 of the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*, the application must be accompanied by a statutory declaration made by a person authorised to do so indicating the facts establishing a basis for FWA to be satisfied that the requirements of subitems 19(2) and (3) have been complied with including a copy of the written declaration.

## Multiple approvals via a single application form

An employer may use this form to make application for approval of the termination of multiple agreements, in which case the employer should attach a schedule setting out the relevant details and insert “see schedule” where appropriate on the form.

The schedule should be prepared using the standard form spreadsheet which can be found at: [http://www.fwa.gov.au/documents/forms/form\\_f29.xls](http://www.fwa.gov.au/documents/forms/form_f29.xls).

An electronic copy of the spreadsheet should be provided at the time the application is lodged. If the application is made under item 17 of Schedule 3 of the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*, a copy of each of the relevant termination agreements must still accompany the application. The employer is not required to serve the schedule in a way that will reveal the identity of an employee on the schedule to other employees on the schedule.

## Form F30 Application for a Majority Support Determination

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR A MAJORITY SUPPORT DETERMINATION

*Fair Work Act 2009—s.236*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Employer(s) who will be covered by the proposed agreement)

**Legal name:**

**Trading name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

*[If known]*

<b>Telephone:</b>	<b>Mobile:</b>
<b>Fax:</b>	<b>Email:</b>

**1. What is the industry of the employer?**

*[Specify industry.]*

**2. Employees who will be covered by the proposed enterprise agreement:**

**2.1** Will the proposed enterprise agreement cover all employees of the employer(s) listed above?

☐ Yes

☐ No

**2.2** If “No”, specify the employees who will be covered by the proposed agreement (including by indicating how such employees are geographically, operationally and/or organisationally distinct):

**3. Grounds:**

*[Using numbered paragraphs, set out the facts and circumstances on which the Applicant relies going to:*

- the employer(s) listed above having not yet agreed to bargain, or initiated bargaining, for the proposed enterprise agreement;*
- the group of employees who will be covered by the proposed agreement having been fairly chosen; and*
- other matters, if any, that make it reasonable in all the circumstances to make the determination sought.]*

**4. Proposed method for determining majority support:**

*[Propose how FWA should be satisfied that a majority of the relevant employees want to bargain for an enterprise agreement.]*

<b>Date:</b>
<b>Signature:</b>
<b>Name:</b>
<b>Capacity/Position:</b>

**Service requirements**

**This application must be served on the Respondent(s) and any other bargaining representatives listed in the application as soon as practicable after the document is lodged with FWA.**

**This application must also be served on other persons as directed by FWA if and when such direction(s) are given.**

Note: Rules 9 and 10 deal with service.

## Form F31 Application for a Scope Order

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR A SCOPE ORDER

*Fair Work Act 2009—s.238*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Other bargaining representative(s))

**Name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**A bargaining representative for:**

**Contact person:**

*[If known]*

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. What is the industry of the employer?**

*[Specify industry.]*

**2. Grounds:**

2.1 *[Insert name of bargaining representative]* is maintaining that the proposed agreement cover the following group of employees:

*[Describe group]*

2.2 The Applicant has concerns that bargaining for the proposed collective agreement is not proceeding efficiently or fairly because the agreement will not cover appropriate employees, or will cover employees that it is not appropriate for the agreement to cover.

**3. Particulars:**

*[By reference to the operational, geographical and/or organisational location of the employees referred to in paragraph 2.1 and of other employees the Applicant contends should be covered by the agreement, identify how the agreement will not cover appropriate employees, or will cover employees that it is not appropriate for the agreement to cover.]*

**4. The Applicant contends that the proposed agreement should cover the following employees:**

*[Describe employees the Applicant contends should be covered by the proposed agreement.]*

**5. The Applicant has met, or is meeting, the good faith bargaining requirements?**

☐ Yes

☐ No

**6. Set out other circumstances, if any, relevant to whether it is reasonable to make the order sought:**

**7. Notice under s.238(3):**

7.1 **Attach** a copy of any notice under s.238(3).

---

7.2 List the persons to whom that notice was given and the date such notice was given:

<p><b>Date:</b></p> <p><b>Signature:</b></p> <p><b>Name:</b></p> <p><b>Capacity/Position:</b></p>
---

**Service requirements**

**This application must be served on the other bargaining representatives as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F32 Application for a Bargaining Order

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR A BARGAINING ORDER

*Fair Work Act 2009—s.229*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Bargaining representative(s) against whom an order is sought)

**Name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**A bargaining representative for:**

**Contact person:**

**Telephone:**

**Mobile:**

---

**Fax:**

**Email:**

- 1. What is the industry of the employer?**  
*[Specify industry.]*
- 2. Other bargaining representatives:**  
*[List other bargaining representatives, if any, of whom the Applicant is aware and their addresses and contact details.]*
- 3. Existing enterprise agreement(s):**  
*[Identify all enterprise agreements that currently apply to an employee or employees who will be covered by the proposed agreement and the nominal expiry date of each such agreement: see s.229(3).]*
- 4. Notice under s.229(4):**  
*[If a notice under s.229(4) has been given, **attach** a copy of the notice and list the bargaining representatives to whom the notice was given and the date(s) on which it was given. If no such notice has been given, state that fact.]*
- 5. Grounds:**  
*[Using numbered paragraphs, set out the facts and circumstances upon which the Applicant relies in support of the application. Including:*
  - when the employer(s) agreed to bargain or initiated bargaining or whether a majority support determination, scope order or low-paid authorisation is in operation: see s.230(2);*
  - the facts and circumstances giving rise to a concern that one or more of the relevant bargaining representatives for the agreement have not met, or are not meeting, the good faith bargaining requirements or that the bargaining process is not proceeding efficiently or fairly because there are multiple bargaining representatives for the agreement (see s.230(3)), including any response to the concerns expressed in the notice under s.229(4).]*
- 6. Order(s) sought:**  
*[Set out the orders sought or attach a draft order. See s.231 for the content of bargaining orders.]*

---

<p><b>Date:</b></p> <p><b>Signature:</b></p> <p><b>Name:</b></p> <p><b>Capacity/Position:</b></p>
---

**Service requirements**

**This application must be served on the named Respondent(s) and other bargaining representatives as soon as practicable after it is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F33 Application for a Serious Breach Declaration

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR A SERIOUS BREACH DECLARATION

*Fair Work Act 2009—s.234*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Bargaining representative(s) against whom an order is sought)

**Name:**

**ABN:** *[If known]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**A bargaining representative for:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. Other bargaining representatives:**

*[List other bargaining representatives, if any, of whom the Applicant is aware.]*

**2. What is the industry of the employer?**

*[Specify industry.]*

**3. Bargaining orders allegedly breached:**

*[List the bargaining order(s), the breach of which forms the basis of the application and **attach** a copy of each of those orders.]*

**4. Grounds:**

*[Using numbered paragraphs, set out the facts and circumstances upon which the Applicant relies in support of the application. Including the facts and circumstances upon which it is contended that the bargaining orders have been contravened in a serious and sustained way that has significantly undermined bargaining for the agreement and how the other requirements of s.235(2) are satisfied.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application must be served on the named Respondent(s) and other bargaining representatives as soon as practicable after it is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F34 Application for a Protected Action Ballot Order

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR A PROTECTED ACTION BALLOT ORDER

*Fair Work Act 2009—s.437*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

**A bargaining representative for:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Employer(s) who will be covered by the proposed agreement)

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

- 1. What is the industry of the employer?**  
*[Specify industry.]*
- 2. Existing enterprise agreement(s):**  
*[Identify all enterprise agreements that currently apply to an employee or employees who will be covered by the proposed agreement and the nominal expiry date of each such agreement: see s.438.]*
- 3. Group or groups of employees to be balloted:**  
*[Set out details of the group or groups of employees to be balloted.]*
- 4. Question(s) to be put:**  
*[Set out the question(s) to be put to the employees who are to be balloted including the nature of the proposed industrial action.]*
- 5. Proposed date by which voting is to close:**
- 6. Protected action ballot agent:**
  - 6.1** Does the Applicant seek the appointment of someone other than the Australian Electoral Commission as the protected action ballot agent?  
  
☐ Yes  
☐ No
  - 6.2** If “Yes”:
    - 6.2.1** The Applicant seeks the appointment of the following person as the protected action ballot agent:  
*[Insert the name, address and contact details of the proposed protected action ballot agent. Note: If the proposed protected action ballot agent is the Applicant themselves, or an officer of the Applicant, FWA is required to appoint an independent ballot advisor and the name, address and contact details of any person proposed as an independent ballot advisor should also be included.]*
    - 6.2.2** What directions does the Applicant propose FWA should give to the protected action ballot agent pursuant to s.450?

---

*[Set out proposed directions addressing each of the matters specified in s.450(2)(a)-(d) and s.450(4).]*

<p><b>Date:</b></p> <p><b>Signature:</b></p> <p><b>Name:</b></p> <p><b>Capacity/Position:</b></p>
---

### Service requirements

**This application must be served, within 24 hours after it is lodged with FWA, on:**

- **the employer(s) who will be covered by the proposed agreement;**
- **the proposed protected action ballot agent (in the case of the Australian Electoral Commission, by sending a copy of the application by email to [secret.ballots@aec.gov.au](mailto:secret.ballots@aec.gov.au)) and any person proposed as an independent ballot advisor.**

Note 1: Rules 9 and 10 deal with service.

Note 2: If the AEC is to be the ballot agent the copy of the application served on the AEC should be accompanied by a completed AEC information form (a copy of which can be found at [www.aec.gov.au/elections/pab](http://www.aec.gov.au/elections/pab)). There is no legal obligation to provide that form at the time of serving the application on the AEC but doing so will help the AEC to conduct the ballot in the shortest possible time.

### Other requirements

The application must be accompanied by a draft order.

An electronic copy of this application and the draft order should be emailed to the chambers of the member of FWA named on any notice of listing as soon as practicable after the application has been listed.

---

## Form F35 Application for Variation of a Protected Action Ballot Order

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.:

[Insert FWA matter number of ballot order.]

### APPLICATION FOR VARIATION OF A PROTECTED ACTION BALLOT ORDER

*Fair Work Act 2009—s.447*

#### Applicant

**Name:**

**Title** [if applicable] Mr [ ] Mrs [ ] Ms [ ] Other [ ] specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** [If applicable]

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s)

**Name:**

**ABN:** [If known]

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Respondent is a company or organisation:

**Contact person:**

*[If known]*

Contact details for the Respondent or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. Protected action ballot order to which this application relates:**

Order print number:

Date of order:

FWA Member who made the order:

FWA Matter No. of the application in which the order  
was made:

*[Note: **Attach** a copy of the order.]*

**2. Capacity in which the Applicant applies:**

☐ applicant for the protected action ballot order;

☐ the protected action ballot agent.

**3. Variation(s) sought:**

*[Set out, or attach as a schedule, the variation(s) sought.]*

**4. Grounds:**

*[Using numbered paragraphs, set out the grounds for the variation(s) sought.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application must be served on the employer of employees to be  
balloted, the protected action ballot agent and independent advisor as  
soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F36 Application for Revocation of a Protected Action Ballot Order

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR REVOCATION OF A PROTECTED ACTION BALLOT ORDER

*Fair Work Act 2009—s.448*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

The Applicant (being the Applicant for the protected action ballot order made by FWA, specified below) applies to have that order revoked.

#### Protected action ballot order:

Order print  
number:

Date of  
order:

---

FWA Member who made the  
order:

FWA Matter No. of the application in which the order  
was made:

<p><b>Date:</b></p> <p><b>Signature:</b></p> <p><b>Name:</b></p> <p><b>Capacity/Position:</b></p>
---

### Service requirements

**This application must be served on the employer(s) to whom the protected action ballot order related, the protected action ballot agent and the independent ballot advisor (if any) as soon as practicable after the document is lodged with FWA.**

Note 1: Rules 9 and 10 deal with service.

Note 2: If FWA is satisfied that the Applicant was also the Applicant for the protected action ballot order to which this application relates, FWA must make the order sought in this application (s.448). The revocation order will be made in chambers without further reference to the parties.

## Form F37 Application for an Order to Suspend or Terminate Protected Industrial Action

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR AN ORDER TO SUSPEND OR TERMINATE PROTECTED INDUSTRIAL ACTION

*Fair Work Act 2009—ss.423–426*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s) (Bargaining representatives of persons taking industrial action)

**Name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Respondent is a company or organisation:

**Contact person:**

**ABN:**

*[If known]*

*[If known]*

Contact details for the Respondent or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. The Applicant, relying on the following provisions of the Act:**

*[Specify the section(s) from among s.423–426 that are relied upon.]*

**Applies for an order that the protected industrial action referred to below be:**

☐ terminated;

☐ suspended for a period of *[specify period]*:

**2. What is the industry of the employer?**

*[Specify industry.]*

**3. Protected industrial action is:**

☐ being engaged in; and/or,

☐ (if s.424 is relied upon) threatened, impending or probable.

**By:**

*[Specify by name or reference to a class who is taking and/or threatening to take protected industrial action.]*

**Particulars:**

*[Briefly describe the industrial action that is being engaged in or that is threatened, impending or probable (in which case, specify the basis upon which the Applicant contends that such action is threatened, impending or probable.)]*

**4. Grounds:**

*[Using numbered paragraphs, specify:*

- the provision(s) of Division 6 of Part 3-3 of the Act upon which the Applicant relies; and*
- by reference to those provision(s) in Division 6 of Part 3-3 of the Act briefly specify how the requirements of such provision(s) are satisfied.]*

**Date:**

**Signature:**

**Name:**

---

<b>Capacity/Position:</b>
---------------------------

**Service requirements**

**This application must be served on the named Respondent(s) as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F38 Application for an Order for Extension of a Suspension of Protected Industrial Action

IN FAIR WORK AUSTRALIA

*FWA use only*

FWA Matter No.:

### APPLICATION FOR AN ORDER FOR EXTENSION OF A SUSPENSION OF PROTECTED INDUSTRIAL ACTION

*Fair Work Act 2009—s.428*

#### Applicant

Name:

Title [if applicable] Mr [ ] Mrs [ ] Ms [ ] Other [ ] specify:

Address:

Suburb:

State:

Postcode:

If the Applicant is a company or organisation:

Contact person:

ABN:

Contact details for the Applicant or contact person (if one is specified):

Telephone:

Mobile:

Fax:

Email:

#### Applicant's representative (if any)

Name:

ABN: [If applicable]

Address:

Suburb:

State:

Postcode:

Contact person:

Telephone:

Mobile:

Fax:

Email:

#### Respondent(s) (Persons bound by the suspension order)

Name:

Address:

Suburb:

State:

Postcode:

If the Respondent is a company or organisation:

Contact person:

ABN:

[If known]

[If known]

Contact details for the Respondent or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

The Applicant applies for an extension of the suspension order made by FWA specified below:

**1. Suspension order:**

Order print number:

Date of order:

FWA Member who made the order:

FWA Matter No. of the application in which the order was made:

[Note: **Attach** a copy of the order.]

**2. Period of extension sought:**

[Provide timeframe and/or dates.]

**3. Grounds:**

[Using numbered paragraphs, specify the facts and circumstances that make it appropriate to extend the period of suspension specified in the suspension order.]

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application must be served on the named Respondent(s) as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F39 Application for an Order in Relation to Partial Work Bans

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR AN ORDER IN RELATION TO PARTIAL WORK BANS

*Fair Work Act 2009—s.472*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent (Employer)

**Legal name:**

**Trading name:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Respondent is a company or organisation:

<b>Contact person:</b> [If known]	<b>ABN:</b> [If known]
Contact details for the Respondent or contact person (if one is specified):	
<b>Telephone:</b>	<b>Mobile:</b>
<b>Fax:</b>	<b>Email:</b>

1. **What is the industry of the employer?**  
[Specify industry.]
2. **Variation sought:**  
[Specify the variation sought to the proportion by which employee payments are reduced.]
3. **Grounds:**  
[Using numbered paragraphs, specify the grounds on which the Applicant relies, including:
  - the nature and extent of the partial work bans and the days on which such bans were applied;
  - the reduction in employee payments notified and/or made by the employer (attach a copy of any notice(s) from the employer pursuant to s.471(1)(c) if available);
  - the facts or circumstances that make it fair and reasonable to vary the proportion by which employee payments are reduced.]

<b>Date:</b>
<b>Signature:</b>
<b>Name:</b>
<b>Capacity/Position:</b>

### Service requirements

**This application must be served on the Respondent as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F40 Application for Orders in Relation to Transfer of Business

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR ORDERS IN RELATION TO TRANSFER OF BUSINESS

*Fair Work Act 2009—ss.318, 319*

#### **Applicant**

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### **Applicant's representative (if any)**

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

- 1. What is the name of the transferable instrument to which this application relates?**

*[Insert the name of the enterprise agreement approved by FWA, workplace determination or named employer award. **Attach** a copy of the instrument.]*

- 2. What is the industry of the employer?**

*[Specify industry.]*

**3. Capacity in which the Applicant applies:**

- ☐ a new employer or the likely new employer;
- ☐ a transferring employee or the likely transferring employee;
- ☐ a non-transferring employee who performs or is likely to perform, the transferring work for the new employer;
- ☐ if the application relates to an enterprise agreement, an employee organisation that is or is likely to be covered by the agreement;
- ☐ if the application relates to a named employer award, an employee organisation that is entitled to represent the industrial interests of a transferring employee or the likely transferring employee.

**4. Order(s) sought:**

*[Set out the terms of the order(s) sought.]*

**5. Grounds:**

*[Using numbered paragraphs, set out the grounds, including particulars, upon which the Applicant relies in seeking such order(s).]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application must be served on the other parties to the transferable instrument, any organisation that ordinarily represents the industrial interests of the transferring employees and the new employer as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F41 Application to Vary a Transferable Instrument

### IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION TO VARY A TRANSFERABLE INSTRUMENT

*Fair Work Act 2009—s.320*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

1. **What is the name of the transferable instrument to which the application relates?**

*[Insert the name of the enterprise agreement approved by FWA, workplace determination or named employer award. **Attach** a copy of the instrument.]*

2. **What is the industry of the employer?**

*[Specify industry.]*

3. **Capacity in which the Applicant applies:**

- ☐ a person who is likely to be covered by the transferable instrument;
- ☐ if the application relates to a named employer award, an employee organisation that is entitled to represent the industrial interests of an employee who is, or is likely to be, covered by the named employer award.

**4. Variation(s) sought:**

*[Set out the terms of the variation(s) sought.]*

**5. Grounds:**

*[Using numbered paragraphs, set out the grounds, including particulars, upon which the Applicant relies in seeking such order(s).]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application must be served on the other parties to the transferable instrument (and, if the transferable instrument is a named employer award [see s.312(2)], any employee organisation that is entitled to represent the industrial interests of an employee) as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F42 Application for an Entry Permit

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR AN ENTRY PERMIT

*Fair Work Act 2009—s.512*

#### Applicant (organisation or branch)

**Organisation:**

**Branch:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. The Applicant is:**

- ☐ registered under the *Fair Work (Registered Organisations) Act 2009*;
- ☐ transitionally recognised under Schedule 1 to the *Fair Work (Registered Organisations) Act 2009*;
- ☐ a State-registered association recognised under Schedule 2 to the *Fair Work (Registered Organisations) Act 2009*.

**2. Application is made pursuant to s.512 of the Act for the issue of an entry permit to the following person:**

**Name:**

**The proposed permit holder is:** ☐ an Office Holder ☐ an Employee

**Office or Position held:**

**Committee of management member making application:**

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

#### Declaration by member of committee of management

I,  
[name]

Of  
[address]

[office]

Declare That, having made proper inquiries (including inquiries of the proposed permit holder) and having reviewed the records of the organisation, declare that the proposed permit holder is a fit and proper person to hold a right of entry permit in that, to the best of my knowledge and belief, the proposed permit holder:

- (a) has received appropriate training about the rights and responsibilities of a permit holder, namely:  
*[Describe the training received, its content and the form in which it was delivered. If this is the first permit sought on or after 27 March 2006 you should provide documentary copies of the relevant training material. In subsequent applications it may be sufficient to refer to the material previously provided to Fair Work Australia on [date].]*
- (b) has never been convicted of an offence against an industrial law;
- (c) has never been convicted of an offence against a law of the Commonwealth, a State, a Territory or a foreign country, involving:
  - (i) entry onto premises; or
  - (ii) fraud or dishonesty; or
  - (iii) intentional use of violence against another person or intentional damage or destruction of property;

*[Note: s.513(2) has the effect that certain offences need not be disclosed.]*

- (d) has never been ordered to pay a penalty under this Act or any other industrial law in relation to action taken by the official nor has any other person been ordered to pay a penalty in respect of such action;
- (e) has not had revoked, suspended or been made subject to conditions, any permit issued under Part 3-4 of the Act or a similar law of the Commonwealth (no matter when in force);
- (f) has not had cancelled, suspended or had imposed conditions on a right of entry for industrial or occupational health and safety (OHS) purposes, by any court, or other person or body, under a State or Territory industrial law or an OHS law; and

- (g) has not been disqualified, by any court, or other person or body, under a State or Territory industrial law or an OHS law, from exercising, or applying for, a right of entry for industrial or occupational health and safety purposes under that law.

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

Note: Adjust declarations as appropriate to reflect the facts.

### **Declaration by proposed permit holder**

I,

[*name*]

Of

[*address*]

[*office or position*]

Declare That:

- (a) I have received the training about the rights and responsibilities of a permit holder referred to in the declaration above;
- (b) I have never been convicted of an offence against an industrial law;
- (c) I have never been convicted of an offence against a law of the Commonwealth, a State, a Territory or a foreign country, involving:
  - (i) entry onto premises; or
  - (ii) fraud or dishonesty; or
  - (iii) intentional use of violence against another person or intentional damage or destruction of property;
- (d) I have never been ordered to pay a penalty under this Act or any other industrial law in relation to my action nor has any other person been ordered to pay a penalty in respect of such action;
- (e) I have not had revoked, suspended or been made subject to conditions, any permit issued under Part 3-4 of the Act or a similar law of the Commonwealth (no matter when in force);

- (f) I have not had cancelled, suspended or had imposed conditions on a right of entry for industrial or occupational health and safety purposes, by any court, or other person or body, under a State or Territory industrial law or an OHS law; and
- (g) I have not been disqualified, by any court, or other person or body, under a State or Territory industrial law or an OHS law, from exercising, or applying for, a right of entry for industrial or occupational health and safety purposes under that law.

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

Note: Adjust declarations as appropriate to reflect the facts.

## Form F43 Application for an Order for Access to Non-Member Records

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR AN ORDER FOR ACCESS TO NON-MEMBER RECORDS *Fair Work Act 2009—s.483AA*

#### **Applicant (Permit holder)**

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### **Applicant's representative (if any)**

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### **1. Applicant's entry permit:**

Entry permit number:

Conditions (if any) imposed on entry  
permit:

#### **2. Details of proposed exercise of right of entry under s.481:**

Employer:

Premises to be  
entered:

Date(s) of entry:

**3. What is the industry of the employer?**

*[Specify industry.]*

**4. Suspected contravention(s):**

*[Set out the contravention(s) of the Act or a term of a fair work instrument (i.e. a term of a modern award, enterprise agreement, workplace determination or an FWA order) that the permit holder suspects has occurred or is occurring and to which the proposed entry relates.]*

**5. Non-member records to which access is sought:**

*[Specify the non-member records or documents (or parts of such records of documents) to which access is sought.]*

**6. Grounds and reason for the application:**

*[Using numbered paragraphs, set out the grounds and reason for the application including:*

- Specifying the basis for suspecting the suspected contravention(s);*
- Where a suspected contravention is of a fair work instrument, how that instrument applies or applied to a member or members;*
- Identifying how the suspected contravention(s) relate to, or affect member(s) of Applicant's organisation; and*
- Specifying why it is considered necessary to access the non-member records to which access is sought.*

*Note: It is unnecessary to identify the name of any member or employee.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application is made *ex parte* (i.e. the application is not served on the relevant employer). FWA will determine whether the employer**

---

**and/or any wronged members should be served and given an opportunity to be heard.**

## Form F44 Application for an Exemption from Requirement to Provide Entry Notice

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR AN EXEMPTION FROM REQUIREMENT TO PROVIDE ENTRY NOTICE

*Fair Work Act 2009—s.519*

#### Applicant Organisation

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### 1. Details of proposed exercise of right of entry under s.481:

Employer:

Premises to be  
entered:

Date(s) of entry:

#### 2. What is the industry of the employer?

*[Specify industry.]*

**3. Suspected contravention(s):**

*[Set out the contravention(s) of the Act or term of a fair work instrument (i.e. a term of a modern award, enterprise agreement, workplace determination or an FWA order) that the permit holder suspects has occurred or is occurring and to which the proposed entry relates.]*

**4. Grounds:**

*[Using numbered paragraphs, set out the grounds for the application including:*

- Specifying the basis for suspecting the suspected contravention(s);*
- Where a suspected contravention is of a fair work instrument, how that instrument applies or applied to a member or members;*
- Identifying how such suspected contravention(s) relate to, or affect member(s) of the permit holder's organisation; and*
- Specifying the basis upon which it is contended that the giving of an entry notice might result in the destruction, concealment or alteration of relevant evidence.*

*Note: It is unnecessary to identify the name of any member or employee.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

Note: If this application is accompanied by a statutory declaration verifying the truth of the facts asserted in the application, the application may be considered and granted in chambers without the need for a formal hearing.

## Form F45 Application for an Affected Member Certificate

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR AN AFFECTED MEMBER CERTIFICATE *Fair Work Act 2009—s.520*

#### Applicant Organisation

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

**1. Relevant premises:**

*[Identify the premises to which the certificate, if granted, is to relate.]*

**2. Relevant member(s):**

*[List the members in respect of whom a certificate is sought and the work performed by each such member at the relevant premises.]*

**3. What is the industry of the employer?**

---

[Specify industry.]

**4. Suspected contravention(s):**

*[Set out the contravention(s) of the Act or term of a fair work instrument (i.e. a term of a modern award, enterprise agreement, workplace determination or an FWA order) that the permit holder suspects has occurred or is occurring and to which the proposed entry relates.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Evidentiary requirements**

This application must be accompanied by a statutory declaration(s):

- establishing that the persons identified as relevant member(s) are members of the Applicant Organisation and perform work on the relevant premises;
- identifying how the Applicant Organisation is entitled to represent the industrial interests of the relevant member(s) (e.g. by identifying the relevant eligibility rule);
- specifying the facts and circumstances that ground the suspected contravention(s) of the kind referred to in s.481(1).

## Form F46 Application to Vary a Modern Award

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION TO VARY A MODERN AWARD

*Fair Work Act 2009—ss.157–160*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

1. **What is the name of the modern award to which the application relates?**  
*[Also include the Award ID/Code No. of the modern award.]*
2. **What is the industry of the employer?**  
*[Specify industry.]*
3. **Variation(s) sought:**  
*[Set out, or attach as a separate schedule, the variation(s) sought.]*

---

**4. Grounds:**

*[Using numbered paragraphs, set out the grounds upon which the Applicant relies in seeking such variation(s).]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**The Applicant must seek directions from FWA as to service of this application.**

## Form F47 Application to Vary a Pre-reform or Transitional Award

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION TO VARY A PRE-REFORM OR TRANSITIONAL AWARD

*Fair Work (Transitional Provisions and Consequential Amendments)  
Act 2009—item 12 of Schedule 3 and item 1 of Schedule 20*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

- 1. What is the name of the pre-reform or transitional award to which the application relates?**  
*[Also include the Award ID/Code No. of the pre-reform or transitional award.]*
- 2. What is the industry of the employer?**  
*[Specify industry.]*

**3. Variation(s) sought:**

*[Set out, or attach as a separate schedule, the variation(s) sought.]*

**4. Grounds:**

*[Using numbered paragraphs, set out the grounds upon which the Applicant relies in seeking such variation(s).]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**The Applicant must serve this application on the Respondents to the pre-reform or transitional award.**

**It is open to an applicant to seek an order for substituted service (see rule 10) to avoid the need to serve this application on each and every respondent to the award.**

Note: Rules 9 and 10 deal with service.

## Form F47A Application for a Take-home Pay Order (Individual Employee/Outworker)

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR A TAKE-HOME PAY ORDER (INDIVIDUAL EMPLOYEE/OUTWORKER)

*Fair Work (Transitional Provisions and Consequential Amendments) Act 2009—  
item 32 of Schedule 3A, item 9 or 13B of Schedule 5, item 12 of Schedule 6 and item  
14 of Schedule 6A*

*[If you require information about completing and lodging this form, please go to  
www.fwa.gov.au or call 1300 799 675.]*

#### **Applicant**

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### **Applicant's representative (if any)**

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### **Respondent (Employer)**

**Name:**

**ABN:** *[If known]*

**Address:**

<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b> <i>[If known]</i>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

1. **Your employer's industry/business:**  
*[Specify the industry in which your employer operates. If you are unsure, describe your employer's business.]*
2. **Employee or Outworker**  
Please indicate whether you are an employee or an outworker:  

☐ Employee  
☐ Outworker
3. **Modern Award**  
*[The name of the modern award that applies to you in relation to which you contend that you have suffered a modernisation-related reduction in take-home pay.]*
4. **Previous Award**  
*[The name of the award-based transitional instrument (i.e. the state or federal award or other award-based transitional instrument) that applied to you (or an employee in an equivalent position to you) immediately before the commencement of the modern award specified in item 4 (if known).]*
5. **Reduction in take-home pay attributable to the making of the modern award:**  
*[Give details of how, following the commencement of the modern award, your take-home pay has been reduced or is likely to be reduced as a result of the making of the modern award. Give as much detail as possible about changes to particular entitlements— e.g., describe any changes to your ordinary rate of pay, overtime rate, shift penalty rate, meal allowance etc.]*

<b>Date:</b>
<b>Signature:</b>
<b>Name:</b>
<b>Capacity/Position:</b>

### **Service requirements**

**This form must be served on the Respondent (Employer) as soon as reasonably practicable after it is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F47B Response to Application for a Take-home Pay Order (Individual Employee/Outworker)

*(Subrule 16B.1, Fair Work Australia Rules 2010)*

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.: C

*[Insert FWA matter number appearing on the main application form.]*

#### Applicant:

*[Insert name of Applicant from main application.]*

#### Respondent:

*[Insert name of Respondent from main application. If that name is incorrect, insert correct name below.]*

### RESPONSE TO APPLICATION FOR A TAKE-HOME PAY ORDER (INDIVIDUAL EMPLOYEE/outworker)

#### Respondent (Employer)

Legal name:

Trading name:

ABN:

Address:

Suburb:

State:

Postcode:

Contact person:

Email:

Telephone:

Fax:

Mobile:

#### Respondent's representative (if any)

Name:

Address:

Suburb:

State:

Postcode:

Contact person:

Email:

Telephone:

Fax:

Mobile:

1. Do you disagree with the information in item 1, 2, 3 or 4 of the Application?

- ☐ Yes  
☐ No

If “Yes”, please identify the item and specify the correct information:

- 2. Response to the alleged reduction in take-home pay**  
*[Using numbered paragraphs, please provide an outline of the respondent’s response to the matters asserted in item 5 of the Application.]*
- 3. Reduction minor or compensated in other ways?**  
*[Indicate whether the respondent contends that any reduction or likely reduction in take-home pay attributable to the award modernisation process is minor or has been adequately compensated in other ways (in which case specify the ways and, if practicable, quantify the value of any compensating entitlements).]*

<p><b>Date:</b></p> <p><b>Signature:</b></p> <p><b>Name:</b></p> <p><b>Capacity/Position:</b></p>
---

#### Service requirements

**This response must be lodged with FWA and served on the Applicant within 14 days of being served with a Form F47A application.**

Note: Rules 9 and 10 deal with service.

## Form F47C Application for a Take-home Pay Order (Multiple Employees/Outworkers)

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR A TAKE-HOME PAY ORDER (MULTIPLE EMPLOYEES/OUTWORKERS)

*Fair Work (Transitional Provisions and Consequential Amendments) Act 2009 — item 32 of Schedule 3A, item 9 or 13B of Schedule 5, item 12 of Schedule 6 and item 14 of Schedule 6A*

[If you require information about completing and lodging this form, please go to [www.fwa.gov.au](http://www.fwa.gov.au) or call 1300 799 675.]

#### Applicant

**Name:**

**Title** [if applicable] Mr [ ] Mrs [ ] Ms [ ] Other [ ] specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** [If applicable]

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent (Employer)

**Name:**

**ABN:** [If known]

**Address:**

<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b> [If known]		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

**1. Capacity in which Applicant applies:**

- ☐ an organisation that is entitled to represent the industrial interests of an employee or outworker who has suffered a modernisation related reduction in take-home pay; or
- ☐ a person acting on behalf of a class of such employees or outworkers.

**2. Application is made pursuant to the following provision(s) of the *Fair Work (Transitional Provisions and Consequential Amendments) Act 2009*:**

- ☐ Schedule 3A, Item 32 (re Div 2B modern award)
- ☐ Schedule 5, Item 9 (re modern award — other than enterprise modern award or state reference public sector modern award)
- ☐ Schedule 5, Item 13B (in reliance on a provision in a modern award)
- ☐ Schedule 6, Item 12 (re enterprise modern award)
- ☐ Schedule 6A, Item 14 (re state reference public sector modern award)

**3. Employer's industry/business:**

**4. Class(es) of employee/outworker in respect of whom the application is made:**

[Where possible specify class(es) by reference to classification(s) of employee(s)/outworker(s).]

**5. Modern award(s) that apply to those employees/outworkers:**

**6. The award-based transitional instrument(s) — typically pre-reform award(s) or NAPSA(s) — previously binding the employer before the modern award(s) commenced:**

Class of employee	Transitional Award-based Instrument Name	ID No. (AN, AP)
-------------------	--	-----------------

**7. Alleged reduction in take-home pay that has occurred or is likely to occur and is attributable to the relevant award modernisation process:**

*[For each class of employee/outworker specified above, give details of the modernisation related reduction in take-home pay that is attributable to the award modernisation process that led to the making of the modern award(s) specified above. Where possible, quantify the reduction by reference to rates of entitlement immediately before the relevant modern award commenced including a reference to the clause number in the previous pre-reform award/NAPSA.]*

**Class of employee    Particulars of reduction**

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

**Service requirements**

**This application must be served on the employer (respondent) as soon as reasonably practicable after it is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

**Other requirements**

A statutory declaration in the following form must accompany the application.

**STATUTORY DECLARATION IN SUPPORT OF APPLICATION**

I, *[name]*

Of *[address]*, *[occupation]*

Make the following declaration under the *Statutory Declarations Act 1959*:

1. After due enquiry, I declare that, to the best of my knowledge, information and belief:
  - (a) the information in the above application is true and correct;

- (b) each of the particulars of reduction in question 7 of the above form are attributable to the Part 10A of the Workplace Relations Act 1996 award modernisation process and, taken together, are not minor or insignificant; and
- (c) the employee(s)/outworker(s) covered by this application have not been adequately compensated in other ways for the reduction.

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

*[Signature of person making the declaration.]*

Declared at:  
*[place]*

On:  
*[date]*

Before me:  
*[Signature of person before whom the declaration is made.]*

*[Set out the witness' full name, qualification to witness a statutory declaration and address (all in printed letters). Note: A statutory declaration must be made before a "prescribed person": s.8, Statutory Declarations Act 1959 (Cth). For a full description of prescribed persons, go to:  
<http://www.fwa.gov.au/index.cfm?pagename=resourcefactsstatdecs.>]*

## Form F47D Response to an Application for a Take-home Pay Order (Multiple Employees/Outworkers)

(Subrule 16B.2, Fair Work Australia Rules 2010)

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.: C

[Insert FWA matter number appearing on the main application form.]

#### Applicant:

[Insert name of applicant from main application.]

#### Respondent:

[Insert name of respondent from main application. If that name is incorrect, insert correct name below.]

### RESPONSE TO APPLICATION FOR A TAKE-HOME PAY ORDER (MULTIPLE EMPLOYEES/OUTWORKERS)

#### Respondent (Employer)

Legal name:

Trading name:

ABN:

Address:

Suburb:

State:

Postcode:

Contact person:

Email:

Telephone:

Fax:

Mobile:

#### Respondent's representative (if any)

Name:

Address:

Suburb:

State:

Postcode:

Contact person:

Email:

Telephone:

Fax:

Mobile:

1. Do you disagree with the information in item 3, 4, 5 or 6 of the Application?

- ☐ Yes  
☐ No

If “Yes”, please identify the item and specify the correct information (refer to an attached sheet if necessary):

- 2. Response to particulars of alleged reduction(s) in take-home pay?**  
*[Using numbered paragraphs, please provide an outline of the respondent’s response to the matters asserted in item 7 of the Application (refer to an attached sheet if necessary).]*
- 3. Reduction minor or compensated in other ways?**  
*[Indicate whether the respondent contends that any reduction, or likely reduction, in take-home pay attributable to the award modernisation process is minor or has been adequately compensated in other ways (in which case specify the ways and, if practicable, quantify the value of any compensating entitlements).]*

<p><b>Date:</b></p> <p><b>Signature:</b></p> <p><b>Name:</b></p> <p><b>Capacity/Position:</b></p>
---

### Service requirements

**This response must be lodged with FWA and served on the Applicant within 14 days of being served with a Form F47C application.**

Note: Rules 9 and 10 deal with service.

## Form F48 Application for Directions on Procedure

(Rule 5, Fair Work Australia Rules 2010)

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.:

[If application is in an existing proceeding, insert matter number of that proceeding.]

#### Parties:

[If application is in an existing proceeding, insert names of parties.]

### APPLICATION FOR DIRECTIONS ON PROCEDURE

#### Applicant (Party seeking directions)

Name:

Title [if applicable] Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

Address:

Suburb:

State:

Postcode:

If the Applicant is a company or organisation:

Contact person:

ABN:

Contact details for the Applicant or contact person (if one is specified):

Telephone:

Mobile:

Fax:

Email:

#### Applicant's representative (if any)

Name:

ABN: [If applicable]

Address:

Suburb:

State:

Postcode:

Contact person:

Telephone:

Mobile:

Fax:

Email:

#### 1. Circumstances:

[Briefly set out the matter(s) on which direction is sought and the circumstances bearing upon directions that may be given.]

#### 2. Proposed directions (optional):

---

*[Set out proposed directions, if any.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

### **Service requirements**

**If this application is made in relation to a proceeding that has already been commenced, this application must be served on the other party/parties to the proceeding as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F49 Application for Order for Substituted Service

(Rule 10, Fair Work Australia Rules 2010)

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.:

[If application is in an existing proceeding, insert matter number of that proceeding.]

#### Parties:

[If application is in an existing proceeding, insert names of parties.]

### APPLICATION FOR ORDER FOR SUBSTITUTED SERVICE

#### Applicant (Party seeking order)

Name:

Title [if applicable] Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

Address:

Suburb:

State:

Postcode:

If the Applicant is a company or organisation:

Contact person:

ABN:

Contact details for the Applicant or contact person (if one is specified):

Telephone:

Mobile:

Fax:

Email:

#### Applicant's representative (if any)

Name:

ABN: [If applicable]

Address:

Suburb:

State:

Postcode:

Contact person:

Telephone:

Mobile:

Fax:

Email:

Application is made for an order for substituted service for the service otherwise required by the *Fair Work Australia Rules 2010*.

#### 1. Persons in relation to whom substituted service is sought:

[List the names and addresses or describe class of persons.]

**2. Document(s) for which substituted service is sought:**

*[Identify the nature of the originating application or other document(s).]*

**3. Proposed method by which service is to be effected:**

*[Set out the proposed method of service.]*

**4. Grounds:**

*[Using numbered paragraphs, set out the reasons why substituted service is appropriate and why the method of service sought is an appropriate method of effecting service.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

---

## Form F50 Notice of Discontinuance

### IN FAIR WORK AUSTRALIA

#### **FWA Matter No.:**

*[Insert FWA matter number appearing on the main application form.]*

#### **Applicant:**

*[Insert name of Applicant from main application.]*

#### **Respondent(s):**

*[Insert name of Respondent from main application.]*

### **NOTICE OF DISCONTINUANCE**

*Fair Work Act 2009—s.588*

The Applicant:

- ☐ wholly discontinues this matter;  
☐ wholly discontinues this matter as part of a settlement agreement.

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

#### **Service requirements**

**This notice must be served on the Respondent(s) as soon as practicable after it is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## **Form F51    Order Requiring a Person to Attend Fair Work Australia**

*(Rule 18, Fair Work Australia Rules 2010)*

### **IN FAIR WORK AUSTRALIA**

#### **FWA Matter No.:**

*[Insert FWA matter number appearing on the main application form.]*

#### **Applicant:**

*[Insert name of Applicant from main application.]*

#### **Respondent(s):**

*[Insert name of Respondent from main application.]*

### **ORDER REQUIRING A PERSON TO ATTEND FAIR WORK AUSTRALIA**

*Fair Work Act 2009—s.590(2)(a)*

#### **TO:**

*[Name]*

*[Address]*

Pursuant to s.590(2) of the *Fair Work Act 2009* you are **ORDERED** to attend Fair Work Australia at the following time, date and place:

Time:

Date:

Place:

And so from day to day until the matter is concluded or until you are excused from further attendance, to *[describe purpose of attendance, e.g. give evidence, participate in a conference]*.

Dated:

---

Member of Fair Work Australia

Note:

- 
- This order has been issued at the request of [*party applying for order*].
  - You can apply to have this order set aside or varied.
  - If you have any queries in relation to this order please contact the associate to [*member*] on [*telephone number*].

## **Form F52 Order Requiring Production of Documents etc. to Fair Work Australia**

*(Rule 19, Fair Work Australia Rules 2010)*

### **IN FAIR WORK AUSTRALIA**

#### **FWA Matter No.:**

*[Insert FWA matter number appearing on the main application form.]*

#### **Applicant:**

*[Insert name of Applicant from main application.]*

#### **Respondent(s):**

*[Insert name of Respondent from main application.]*

### **ORDER REQUIRING PRODUCTION OF DOCUMENTS ETC. TO FAIR WORK AUSTRALIA**

*Fair Work Act 2009—s.590(2)(c)*

#### **TO:**

*[Name]*

*[Address]*

Pursuant to s.590(2) of the *Fair Work Act 2009* you are **ORDERED** to provide to Fair Work Australia the documents, records and other information specified in the Schedule to this order before Fair Work Australia at the following time, date and place:

Time:

Date:

Place:

Dated:

---

Member of Fair Work Australia

Note:

- This order has been issued at the request of *[party applying for order]*.

- 
- You can apply to have this order set aside or varied.
  - Instead of attending to provide the documents etc. covered by this order at the time and place specified above, you may produce them to an officer of FWA at the place specified above not later than 4.00 pm on the day before the day mentioned above.
  - If you have any queries in relation to this order please contact the associate to [*member*] on [*telephone number*].

## **SCHEDULE**

1. [*List the documents, records and/or information sought.*]
2. ...

## Form F53 Notice of Representative Commencing to Act

(Subrule 17.1, Fair Work Australia Rules 2010)

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.:

[Insert FWA matter number appearing on the main application form, if known.]

#### Applicant:

[Insert name of Applicant from main application.]

#### Respondent(s):

[Insert name of Respondent from main application.]

### NOTICE OF REPRESENTATIVE COMMENCING TO ACT

Take Notice that:

<b>Name:</b>			
<b>Title</b> [if applicable] Mr [ ] Mrs [ ] Ms [ ] Other [ ] specify:			
<b>Address:</b>			
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>	
<b>Telephone:</b>	<b>Mobile:</b>		
<b>Fax:</b>	<b>Email:</b>		

Now acts for [insert party] and may seek leave to represent such party before Fair Work Australia.

<b>Date:</b>
<b>Signature:</b>
<b>Name:</b>
<b>Capacity/Position:</b>

#### Service requirements

**This notice must be served on the other party or parties to the proceeding as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

---

## Form F54 Notice of Representative Ceasing to Act

(Subrule 17.3, Fair Work Australia Rules 2010)

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.:

[Insert FWA matter number appearing on the main application form, if known.]

#### Applicant:

[Insert name of Applicant from main application.]

#### Respondent(s):

[Insert name of Respondent from main application.]

### NOTICE OF REPRESENTATIVE CEASING TO ACT

Take Notice that:

<b>Name:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

Has ceased to act for [insert party] whose current/last known contact details are:

<b>Name:</b>		
<b>Address:</b>		
<b>Suburb:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Contact person:</b>		
<b>Telephone:</b>	<b>Mobile:</b>	
<b>Fax:</b>	<b>Email:</b>	

<b>Date:</b>
<b>Signature:</b>
<b>Name:</b>
<b>Capacity/Position:</b>

#### Service requirements

**This notice must be served on the other party or parties to the proceeding as soon as practicable after the document is lodged with FWA.**

Note: Rules 9 and 10 deal with service.

## Form F55 Application by an Association of Employers for Registration as an Organisation

### IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION BY AN ASSOCIATION OF EMPLOYERS FOR REGISTRATION AS AN ORGANISATION

*Fair Work (Registered Organisations) Act 2009—s.18(a)*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 21(1)(a)*

We,

*[full names, addresses and occupations of applicants],*

make application for the registration of an association of employers called

*[name of the association],*

the office of which is situated at

*[address of the office of the association],*

as an organisation under the *Fair Work (Registered Organisations) Act 2009* (the RO Act), and we state as follows:

- (a) that the association meets the criteria required by paragraphs 19(1)(a), (c) and (e) to (j) inclusive of the RO Act;  
*[Set out in respect of each of the paragraphs the grounds on which the association relies.]*
- (b) that the eligibility rules of the association are:  
*[Insert the rules of the association that relate to the conditions of eligibility for membership and the description of the industry (if any) in connection with which the association is proposed to be registered.];*
- (c) that we, the Applicants, are officers of the association, and are authorised to make this application.

**Date:**

**Signatures of applicants:\***

**Names:**

**Offices held:**

\* This application must be signed by at least 2 persons authorised to sign the application and must contain the declaration required by paragraph 21(1)(b) of the *Fair Work (Registered Organisations) Regulations 2009*.

---

**Form F56 Application by an Association of Employees  
(Other than an Enterprise Association) for  
Registration as an Organisation**

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

**APPLICATION BY AN ASSOCIATION OF EMPLOYEES  
(OTHER THAN AN ENTERPRISE ASSOCIATION) FOR  
REGISTRATION AS AN ORGANISATION**

*Fair Work (Registered Organisations) Act 2009—s.18(b)*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 21(1)(a)*

We,  
[*full names, addresses and occupations of applicants*],

make application for the registration of an association of employees called  
[*name of the association*],

the office of which is situated at  
[*address of the office of the association*],

as an organisation under the *Fair Work (Registered Organisations) Act 2009* (the RO Act) and we state as follows:

- (a) that the association meets the criteria required by paragraphs 19(1)(a), (b) and (d) to (j) inclusive of the RO Act;  
[*Set out in respect of each of the paragraphs the grounds on which the association relies.*]
- (b) that the eligibility rules of the association are:  
[*Insert the rules of the association that relate to the conditions of eligibility for membership and the description of the industry (if any) in connection with which the association is proposed to be registered.*];
- (c) that we, the Applicants, are officers of the association, and are authorised to make this application.

**Date:**

**Signatures of applicants:\***

**Names:**

**Offices held:**

\* This application must be signed by at least 2 persons authorised to sign the application and must contain the declaration required by paragraph 21(1)(b) of the *Fair Work (Registered Organisations) Regulations 2009*.

## Form F57 Application by an Enterprise Association of Employees for Registration as an Organisation

### IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION BY AN ENTERPRISE ASSOCIATION OF EMPLOYEES FOR REGISTRATION AS AN ORGANISATION

*Fair Work (Registered Organisations) Act 2009—s.18(c)*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 21(1)(a)*

We,

*[full names, addresses and occupations of applicants],*

make application for the registration of an association of employees called

*[name of the association],*

the office of which is situated at

*[address of the office of the association],*

as an organisation under the *Fair Work (Registered Organisations) Act 2009* (the RO Act) and we state as follows:

- (a) that the association meets the criteria required by section 20 of the RO Act;  
*[Set out in respect of each of the paragraphs the grounds on which the association relies.]*
- (b) that the eligibility rules of the association are:  
*[Insert the rules of the association that relate to the conditions of eligibility for membership and the description of the industry (if any) in connection with which the association is proposed to be registered.];*
- (c) that we, the Applicants, are officers of the association, and are authorised to make this application.

**Date:**

**Signatures of applicants:\***

**Names:**

**Offices held:**

\* This application must be signed by at least 2 persons authorised to sign the application and must contain the declaration required by paragraph 21(1)(b) of the *Fair Work (Registered Organisations) Regulations 2009*.

---

## Form F58 Notice of Objection to the Registration of an Association

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.:

*[Insert FWA matter number of application for registration.]*

### NOTICE OF OBJECTION TO THE REGISTRATION OF AN ASSOCIATION

*Fair Work (Registered Organisations) Act 2009*

*Fair Work (Registered Organisations) Regulations 2009—regulation 23*

IN the matter of:

*[Insert name of association seeking registration.]*

#### Objector

**Name of objector:**

*[Organisation, association or person interested in lodging the notice of objection.]*

**Address:****Suburb:****State:****Postcode:****Contact person:**

*[Also include the name of any firm of solicitors or agent acting for the objector.]*

**Telephone:****Mobile:****Fax:****Email:**

Notice is given of an objection to the registration of the association.

The grounds on which this objection is made are as follows:

*[Using numbered paragraphs, set out the grounds of objection, the particulars of each ground of objection and briefly state the facts the objector relies on for each ground of objection.]*

**Date:****Signature(s) or Common Seal:\***

\* See regulation 13 of the *Fair Work (Registered Organisations) Regulations 2009*.

---

**Form F59 Application for Leave to Change Name\*/and to Alter Rules\***

**FWA Matter No.:**

[Insert FWA matter number of application for registration.]

**APPLICATION FOR LEAVE TO CHANGE NAME\*/AND TO ALTER RULES\***

*Fair Work (Registered Organisations) Act 2009—s.25(1)*

*Fair Work (Registered Organisations) Regulations 2009—subregulation 27(a)*

**Applicant Association**

<b>Name:</b>			<b>ABN:</b>		
<b>Address:</b>					
<b>Suburb:</b>		<b>State:</b>		<b>Postcode:</b>	
<b>Contact person:</b>					
<b>Title</b> [if applicable] Mr [ ] Mrs [ ] Ms [ ] Other [ ] specify:					
<b>Telephone:</b>			<b>Mobile:</b>		
<b>Fax:</b>			<b>Email:</b>		

The Applicant, which has applied for registration as an organisation, applies to the President or a Deputy President for leave to change its name\*/to alter its rules\*/to change its name and alter its rules\* to enable it to comply with the *Fair Work (Registered Organisations) Act 2009\** and to remove a ground of objection taken by an objector under the Regulations\*/and by the President or Deputy President\*.

Particulars of the proposed change of name\*/and alterations of the rules\* are as follows:

[Set out text of proposed change or alterations.]

<b>Date:</b>
<b>Signature:</b>

\* Omit if inapplicable.

## Form F60 Application by an Organisation for Cancellation of Registration

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION BY AN ORGANISATION FOR CANCELLATION OF REGISTRATION

*Fair Work (Registered Organisations) Act 2009—s.30(1)(a)*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 34(1)(a)*

#### Applicant Organisation

**Name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

The Applicant applies under paragraph 30(1)(a) of the *Fair Work (Registered Organisations) Act 2009* for the cancellation of its registration.

The full particulars of the circumstances that entitle the organisation to make the application are as follows:

*[Set out the full particulars.]*

**Date:**

**Signature(s) or Common Seal:\***

\* An application must be sealed with the common seal of the organisation or be signed by a person authorised to sign the application. See regulation 13 of the *Fair Work (Registered Organisations) Regulations 2009*.

Note: The application is to contain a declaration signed by an officer of the organisation authorised to sign the declaration verifying the facts stated in the application.

## Form F61 Notice of Objection to the Cancellation of Registration of an Organisation

### IN FAIR WORK AUSTRALIA

#### FWA Matter No.:

*[Insert FWA matter number of application for cancellation.]*

### NOTICE OF OBJECTION TO THE CANCELLATION OF REGISTRATION OF AN ORGANISATION

*Fair Work (Registered Organisations) Act 2009*  
*Fair Work (Registered Organisations) Regulations 2009—paragraphs 34(5)(a),*  
*36(4)(a)*

IN the matter of:

*[Insert name of organisation seeking cancellation.]*

#### Objector

**Name of objector:**

*[Person interested in lodging the notice of objection.]*

**Address:****Suburb:****State:****Postcode:****Contact person:**

*[Also include the name of any firm of solicitors or agent acting for the objector.]*

**Telephone:****Mobile:****Fax:****Email:**

Notice is given of an objection to the cancellation of registration of the organisation.

The grounds on which this objection is made are as follows:

*[Using numbered paragraphs, set out the grounds of objection, the particulars of each ground of objection and briefly state the facts the objector relies on for each ground of objection.]*

**Date:****Signature(s) or Common Seal:\***

\* See regulation 13 of the *Fair Work (Registered Organisations) Regulations 2009*.

## Form F62 Application for Cancellation of Registration of an Organisation

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR CANCELLATION OF REGISTRATION OF AN ORGANISATION

*Fair Work (Registered Organisations) Act 2009—s.30(1)(b)*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 35(1)(a)*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

The Applicant applies, under paragraph 30(1)(b) of the *Fair Work (Registered Organisations) Act 2009* (the RO Act), for the cancellation of the registration of the  
*[Insert name of organisation.]*

The full particulars of the circumstances that entitle the Applicant to make the application are as follows:

*[Set out the full particulars.]*

**Date:**

**Signature(s) or Common Seal:\***

\* See regulation 13 of the *Fair Work (Registered Organisations) Regulations 2009*.

Note: The application is to contain a declaration signed by the Applicant or a person authorised by the Applicant verifying the facts stated in the application.

## Form F63 Ballot Paper Chosen by Organisation in Relation to Proposed Amalgamation

### IN FAIR WORK AUSTRALIA

**FWA Matter No.:**

### BALLOT PAPER CHOSEN BY ORGANISATION IN RELATION TO PROPOSED AMALGAMATION

*Fair Work (Registered Organisations) Act 2009*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 60(2)(a)*

BALLOT OF MEMBERS OF:

[Name of organisation whose members are voting.]

[Initials, or facsimile of initials, of the person conducting the ballot.]

### BALLOT PAPER IN RELATION TO PROPOSED AMALGAMATION

Directions to voter:

- Record your vote on the ballot paper as follows:
  - if you approve the amalgamation referred to in the question set out below, place a tick (✓) or a cross (✕) in the space provided opposite the word “Yes”;
  - if you do not approve the amalgamation referred to in the question set out below, place a tick (✓) or a cross (✕) in the space provided opposite the word “No”.
- Do not place on this paper any mark or writing by which you may be identified.
- Mark only one square.

#### Question for voter:

Do you approve the proposed amalgamation of [insert name of organisation whose members are voting] with the following organisation(s), namely, [name of organisation or each organisation with which amalgamation is proposed], in accordance with the scheme for amalgamation, a copy of the outline of which has been sent to you with this ballot paper?

Yes	
No	

## Form F64 Ballot Paper in Relation to Proposed Amalgamation

### IN FAIR WORK AUSTRALIA

**FWA Matter No.:**

#### BALLOT PAPER IN RELATION TO PROPOSED AMALGAMATION

*Fair Work (Registered Organisations) Act 2009*  
*Fair Work (Registered Organisations) Regulations 2009*—paragraph 60(2)(b)

BALLOT OF MEMBERS OF:

*[Name of organisation whose members are voting.]*

*[Initials, or facsimile of initials, of the person conducting the ballot.]*

#### BALLOT PAPER IN RELATION TO PROPOSED AMALGAMATION

##### Directions to voter:

- Record your vote on the ballot paper as follows:
  - if you approve the amalgamation referred to in the question set out below, place a tick (✓) or a cross (✕) in the space provided opposite the word “Yes”;
  - if you do not approve the amalgamation referred to in the question set out below, place a tick (✓) or a cross (✕) in the space provided opposite the word “No”.
- Do not place on this paper any mark or writing by which you may be identified.
- Mark only one square.

##### Question for voter:

Do you approve the proposed amalgamation of *[name of organisation whose members are voting]* with the following organisation(s), namely, *[name of organisation or each organisation with which amalgamation is proposed]*, in accordance with the scheme for amalgamation, a copy of the outline of which has been sent to you with this ballot paper?

Yes	
No	

## Form F65 Ballot Paper Chosen by Organisation and Containing an Alternative Provision in Relation to Proposed Amalgamation

### IN FAIR WORK AUSTRALIA

**FWA Matter No.:**

#### **BALLOT PAPER CHOSEN BY ORGANISATION AND CONTAINING AN ALTERNATIVE PROVISION IN RELATION TO PROPOSED AMALGAMATION**

*Fair Work (Registered Organisations) Act 2009*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 60(3)(a)*

**BALLOT OF MEMBERS OF:**

*[Name of organisation whose members are  
voting.]*

*[Initials, or facsimile of  
initials, of the person  
conducting the ballot.]*

#### **BALLOT PAPER IN RELATION TO PROPOSED AMALGAMATION**

##### **Directions to voter:**

1. This paper contains [*number*] ballot papers. Record your vote on each ballot paper as follows:
  - if you approve the amalgamation referred to in the question set out in the ballot paper, place a tick (✓) or a cross (✕) in the space provided opposite the word “Yes”;
  - if you do not approve the amalgamation referred to in the question set out in the ballot paper, place a tick (✓) or a cross (✕) in the space provided opposite the word “No”.
2. Do not place on this paper any mark or writing by which you may be identified.
3. Mark only one square on each ballot paper.

##### **Question for voter:**

Do you approve the proposed amalgamation of [*name of  
organisation whose members are voting*] with the following

Yes	
-----	--

---

organisation(s), namely, [*name of each organisation with which amalgamation is proposed*], in accordance with the scheme for amalgamation, a copy of the outline of which has been sent to you with this ballot paper?

<b>No</b>	
-----------	--

**Question for voter:**

If the proposed amalgamation in relation to which you have just recorded your vote does not take place, do you approve the amalgamation of [*name of organisation whose members are voting*] with the other organisations concerned in the amalgamation whose members give a similar approval?

<b>Yes</b>	
<b>No</b>	

## Form F66 Ballot Paper Containing an Alternative Provision in Relation to Proposed Amalgamation

### IN FAIR WORK AUSTRALIA

**FWA Matter No.:**

#### **BALLOT PAPER CONTAINING AN ALTERNATIVE PROVISION IN RELATION TO PROPOSED AMALGAMATION**

*Fair Work (Registered Organisations) Act 2009*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 60(3)(b)*

BALLOT OF MEMBERS OF:

*[Name of organisation whose members are  
voting.]*

*[Initials, or facsimile of  
initials, of the person  
conducting the ballot.]*

#### **BALLOT PAPER IN RELATION TO PROPOSED AMALGAMATION**

##### **Directions to voter:**

1. This paper contains [*number*] ballot papers. Record your vote on each ballot paper as follows:
  - if you approve the amalgamation referred to in the question set out in the ballot paper, place a tick (✓) or a cross (✕) in the space provided opposite the word “Yes”;
  - if you do not approve the amalgamation referred to in the question set out in the ballot paper, place a tick (✓) or a cross (✕) in the space provided opposite the word “No”.
2. Do not place on this paper any mark or writing by which you may be identified.
3. Mark only one square on each ballot paper.

##### **Question for voter:**

Do you approve the proposed amalgamation of [*name of organisation whose members are voting*] with the following organisation(s), namely, [*name of organisation with which amalgamation is proposed*], in accordance with the scheme for amalgamation, a copy of the outline of which has been sent to you with this ballot paper?

Yes	
No	

**Question for voter:**

If the proposed amalgamation in relation to which you have just recorded your vote does not take place, do you approve the amalgamation of [*name of organisation whose members are voting*] with the other organisations concerned in the amalgamation whose members give a similar approval?

<b>Yes</b>	
<b>No</b>	

## Form F67 Application for Consent to Change the Name of an Organisation

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR CONSENT TO CHANGE THE NAME OF AN ORGANISATION

*Fair Work (Registered Organisations) Act 2009*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 121(1)(a)*

#### Applicant Organisation

**Name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

The Applicant applies for consent to the change of the name of the organisation to:  
*[Set out proposed new name and the reason for the proposal.]*

**Date:**

**Signature or Common Seal:\***

\* An application must be sealed with the Common Seal of the organisation or be signed by a person authorised to sign the application. See regulation 13 of the *Fair Work (Registered Organisations) Regulations 2009*.

Note: The application is to contain a declaration that the change was made in accordance with the rules of the organisation and stating the action taken under those rules to make the change and verifying the facts stated in the application.

## Form F68 Application for Consent to the Alteration of Eligibility Rules of an Organisation

IN FAIR WORK AUSTRALIA

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR CONSENT TO THE ALTERATION OF ELIGIBILITY RULES OF AN ORGANISATION

*Fair Work (Registered Organisations) Act 2009*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 121(1)(b)*

#### Applicant Organisation

**Name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

The Applicant applies for consent to the alteration of the eligibility rules of the organisation to the following:

*[Insert proposed rules that relate to the conditions of eligibility for membership and the description of industry (if any) in connection with which the organisation is registered as if the application had been granted and the alterations to the rules were in force, showing in distinctive characters each alteration for which consent is sought.]\**

**Date:**

**Signature or Common Seal:\*\***

\* Each alteration for which consent is sought must be highlighted using distinctive characters. For example, deleted or replaced text may be highlighted using ~~striketrough~~ formatting and new text may be highlighted using underlining or *italics* (provided there is no ambiguity with the formatting).

\*\* An application must be sealed with the Common Seal of the organisation or be signed by a person authorised to sign the application. See regulation 13 of the *Fair Work (Registered Organisations) Regulations 2009*.

---

Note: The application should also set out, in sufficient particularity to allow the proposal to be properly considered, the following:

1. the particulars of the proposed alteration;
2. the reason for the proposed alteration; and
3. the effect of the proposed alteration;

and contain a declaration that the alteration was made in accordance with the rules of the organisation and stating the action taken under those rules to make the alteration and verifying the facts stated in the application.

## Form F68A Application for Consent to the Alteration of Eligibility Rules of an Organisation by General Manager

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### **APPLICATION FOR CONSENT TO THE ALTERATION OF ELIGIBILITY RULES OF AN ORGANISATION BY GENERAL MANAGER**

*Fair Work (Registered Organisations) Act 2009*

*Fair Work (Registered Organisations) Regulations 2009—paragraph 125B (1) (a)*

#### **Applicant Organisation**

**Name:**

**ABN:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

The Applicant applies for consent to the alteration of the eligibility rules of the organisation to extend them to apply to persons within the eligibility rules of an association of employers or employees that is registered under a State or Territory industrial law as follows:

*[Insert the complete text of the eligibility rules of the association or as much of the text of the eligibility rules of the association as deals with the extended coverage and include a statement that the alteration of the eligibility rules does not apply outside the State or Territory for which the association is registered.]*

**Date:**

**Signature or Common Seal:**

Note 1: The application must:

1. be accompanied by a copy of the rules of the organisation and a copy of the rules of the association to which the organisation is the federal counterpart; and
2. set out the alteration, the reasons for the alteration and the effect of the alteration in sufficient detail to enable the General Manager to satisfy himself or herself that:
  - (a) the alteration has been made under the rules of the organisation; and
  - (b) the organisation is a federal counterpart of the association; and
  - (c) the alteration will not extend the eligibility rules of the organisation beyond those of the association; and
  - (d) the alteration will not apply outside the limits of the State or Territory for which the association is registered; and
  - (e) the association of employers or employees actively represents the class or classes of employers or employees to which the extension of eligibility rules will apply.
3. include a declaration:
  - (a) that the alteration was made in accordance with the rules of the organisation; and
  - (b) describing the action taken under the rules of the organisation to make the alteration; and
  - (c) verifying the facts stated in the application.

Note 2: An application must be sealed with the Common Seal of the organisation or be signed by a person authorised to sign the application. See regulation 13 of the *Fair Work (Registered Organisations) Regulations 2009*.

Note 3: An organisation that has a website must publish on the website a notice that it has lodged the application.

---

**Form F69 Application for Certificate under Section 180 of the  
*Fair Work (Registered Organisations) Act 2009***

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

**APPLICATION FOR CERTIFICATE UNDER SECTION 180 OF  
THE  
*FAIR WORK (REGISTERED ORGANISATIONS) ACT 2009*  
*Fair Work (Registered Organisations) Regulations 2009—paragraph 128(1)(a)***

**Applicant**

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

I, the Applicant, apply under section 180 of the *Fair Work (Registered Organisations) Act 2009*, for a certificate to the effect that my conscientious beliefs do not allow me to be a member of an association of the kind described in subsections 18(a), (b) or (c) of the *Fair Work (Registered Organisations) Act 2009*.

My occupation is:

The name and address of my business/employer\* is:

The grounds on which my application is made are as follows:  
*[Using numbered paragraphs, set out the grounds and particulars.]*

I attach a statutory declaration verifying the information stated in this application.

---

**Date:**

**Signature of Applicant:**

\* Omit whichever is inapplicable.

**Form F70 Application for Renewal of Certificate under  
Section 180 of the *Fair Work (Registered  
Organisations) Act 2009***

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

**APPLICATION FOR RENEWAL OF CERTIFICATE UNDER  
SECTION 180 OF THE *FAIR WORK (REGISTERED  
ORGANISATIONS) ACT 2009***

*Fair Work (Registered Organisations) Regulations 2009—paragraph 129(3)(a)*

**Applicant**

**Name:**

**Title** [if applicable] Mr [ ] Mrs [ ] Ms [ ] Other [ ] specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

I, the Applicant, apply under section 180 of the *Fair Work (Registered Organisations) Act 2009* to renew a certificate to the effect that my conscientious beliefs do not allow me to be a member of an association of the kind described in subsections 18(a), (b) or (c) of the *Fair Work (Registered Organisations) Act 2009*.

My occupation is:

The name and address of my business/employer\* is:

The grounds on which my application is made are as follows:

[Using numbered paragraphs, set out the grounds and particulars.]

I attach a statutory declaration verifying the information stated in this application.

---

**Date:**

**Signature of Applicant:**

\* Omit whichever is inapplicable.

## Form F71 Application for a Representation Order

**IN FAIR WORK AUSTRALIA**

*FWA use only*

**FWA Matter No.:**

### APPLICATION FOR A REPRESENTATION ORDER

*Fair Work (Registered Organisations) Act 2009—s.137A*

#### Applicant

**Name:**

**Title** *[if applicable]* Mr ☐ Mrs ☐ Ms ☐ Other ☐ specify:

**Address:**

**Suburb:**

**State:**

**Postcode:**

If the Applicant is a company or organisation:

**Contact person:**

**ABN:**

Contact details for the Applicant or contact person (if one is specified):

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Applicant's representative (if any)

**Name:**

**ABN:** *[If applicable]*

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

#### Respondent(s)

**Name:**

**ABN:**

**Address:**

**Contact person:**

**Telephone:**

**Mobile:**

**Fax:**

**Email:**

- 1. Provision(s) under which order(s) are sought:**  
*[Specify the provision(s).]*
- 2. Order sought:**  
*[Specify the order(s) sought.]*
- 3. Grounds:**  
*[Using numbered paragraphs, set out the facts and circumstances on which the Applicant relies in seeking the orders sought.]*
- 4. Organisations etc. that may have an interest in the application:**  
*[Specify the organisations, transitionally recognised associations, recognised state-registered associations and employers likely to have an interest in this application.]*

**Date:**

**Signature:**

**Name:**

**Capacity/Position:**

### Service requirements

**This application must be served on the organisations, transitionally recognised associations, recognised State-registered associations and employers that may have an interest in the application as specified above. The Applicant must seek directions as to further service of the application and serve a copy of the application on other persons as directed by FWA if and when such direction(s) are given.**

Note: Rules 9 and 10 deal with service.

### Note

1. All legislative instruments and compilations are registered on the Federal Register of Legislative Instruments kept under the *Legislative Instruments Act 2003*. See <http://www.frli.gov.au>.

## Notes to the *Fair Work Australia Rules 2010*

### Note 1

The *Fair Work Australia Rules 2010* (in force under section 609(1) of the *Fair Work Act 2009*) as shown in this compilation is amended as indicated in the Tables below.

### Table of Instruments

Title	Date of FRLI registration	Date of commencement	Application, saving or transitional provisions
<i>Fair Work Australia Rules 2010</i>	23 December 2010 (see F2010L03273)	1 January 2011	
<i>Fair Work Australia Amendment Rules 2011 (No. 1)</i>	8 September 2011 (see F2011L01844)	12 September 2011	—
<i>Fair Work Australia Amendment Rules 2012 (No. 1)</i>	11 January 2012 (see F2012L00028)	12 January 2012	—

## Table of Amendments

ad. = added or inserted    am. = amended    rep. = repealed    rs. = repealed and substituted

Provision affected	How affected
R. 6 .....	am. 2012 No. 1
R. 9 .....	am. 2011 No. 1
<b>Part 4</b>	
R. 16A.....	am. 2012 No. 1
<b>Part 4A</b>	
Part 4A.....	ad. 2011 No. 1
R. 16AA.....	ad. 2011 No. 1
R. 16B.....	am. 2011 No. 1
R. 17A.....	ad. 2011 No. 1
<b>Part 6</b>	
R. 20 .....	am. 2012 No. 1
<b>Schedule 1</b>	
Schedule 1 .....	am. 2011 No. 1; 2012 No. 1
<b>Schedule 2</b>	
Form F2 .....	am. 2011 No. 1; 2012 No. 1
Form F3 .....	am. 2011 No. 1; 2012 No. 1
Form F4 .....	am. 2011 No. 1
Form F5 .....	am. 2011 No. 1
Form F6 .....	am. 2011 No. 1
Form F8 .....	am. 2011 No. 1
Form F8A.....	am. 2011 No. 1
Form F9 .....	am. 2011 No. 1
Form F9A.....	ad. 2011 No. 1
Form F10 .....	am. 2011 No. 1
Form F17 .....	rs. 2011 No. 1
	am. 2012 No. 1
Form F18 .....	rs. 2011 No. 1
Form F22 .....	rep. 2011 No. 1
Form F47A.....	am. 2011 No. 1
Form F47B.....	am. 2011 No. 1
Form F47C.....	am. 2011 No. 1
Form F47D.....	am. 2011 No. 1
Form F68A.....	ad. 2012 No. 1