

Instructions for completing

Application to review a decision of the Anti-Discrimination Commissioner regarding lapsed complaint

General instructions**Copies of the application and providing copies to other parties**

The application form and all attachments must be accompanied by three copies. Where there is more than one respondent, an extra copy of the application form and attachments is required for each additional respondent.

Generally, you must give a copy of the application to all parties to the proceeding as soon as practicable, and no later than seven days after the application is filed.

Applications may be lodged

In person: Queensland Civil and Administrative Tribunal, Level 11, Bank of Queensland Building, 259 Queen Street, Brisbane QLD 4000, or at any Magistrates Court outside of the Brisbane CBD.

By mail: QCAT, GPO Box 1639, Brisbane 4001

Some applications may be lodged by fax or email. For more information call 1300 753 228 or visit www.qcat.qld.gov.au

PART A APPLICANT'S AND RESPONDENT'S DETAILS

- More than one applicant may be named in an application. If there is insufficient space for the names of the applicant/s you may attach additional pages with similar details.
- The Anti-Discrimination Commissioner will be the respondent.
- If the applicant or respondent is not an individual then the correct name must be used, for example:
 - a company name
 - a business name regardless of whether it is registered under the *Business Names Act 1962*
 - a State agency name, for example a Queensland Government department.
- Your address will be the address at which documents are given or sent to you, unless you indicate your representative's address as your address for notices.
- Any change in your address for notices must be filed in the tribunal and given to all other parties.

Instructions for completing *(continued)*

PART A APPLICANT'S AND RESPONDENT'S DETAILS *(continued)*

Representative's details

If you want your representative's address as the address for notices, please complete your representative's details.

If you want your representative to represent you in any proceedings before the tribunal you must complete the *Application for leave to be represented* form. Generally the tribunal expects people to represent themselves. It may not grant your request. You are not required to seek leave if:

- you are a child or a person with impaired capacity
- your case is a disciplinary case
- an Act or the Rules state that you may be legally represented

PART B THE DECISION FOR REVIEW

You are required to apply within 28 days of the day you were notified of the decision.

Or the tribunal may give leave to apply outside of the relevant time limit.

If you have a copy of the decision, it must be lodged with this application.

Form Number 21 (version 1)

Queensland Civil and Administrative Tribunal Act 2009 (section 33)

Application to review a decision of the Anti-Discrimination Commissioner regarding lapsed complaint

Refer to attached instructions at the front of this application
prior to filling out this form.

For office use only

Case number:	
Date:	
Registry:	
Sent to:	

PART A APPLICANT'S DETAILS**Name***Title**Given name/s**Surname/Family name***Company/Partnership/other****ABN****Business
Name****Address****Postcode****Telephone***Home**Business**Mobile***Fax****Email**

PART A APPLICANT'S DETAILS *(continued)*

Representative's details *(if applicable)*

- Tick if you want this to be your address for notices
- Tick if you want your representative to represent you in proceedings before the tribunal *(see Part A of the instructions – you may be required to seek the tribunal's leave for this to happen by making an application under the form Application for leave to be represented)*. The tribunal may not give you leave to be represented.

Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Title</i>	<i>Given name/s</i>	<i>Surname/Family name</i>

Company

<input type="text"/>	ABN	<input type="text"/>
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Address

<input type="text"/>		
<input type="text"/>	Postcode	<input type="text"/>

Telephone

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Home</i>	<i>Business</i>	<i>Mobile</i>

Fax

<input type="text"/>

Email

<input type="text"/>

PART A RESPONDENT'S DETAILS

Anti-Discrimination Commissioner

City East Post Shop
PO Box 15565
City East Q 4002
Telephone: 1300 130 670
Fax: (07) 3247 0960

PART D CHECKLIST AND SIGNATURE

- I have completed all questions on the application form according to the instructions
- I have included a copy of the decision for which I am seeking review
- I have completed "Attachment A" – the reasons why the Anti-Discrimination Commissioner should be changed
- I have provided the correct number of copies of the application form and attachments (for the number of copies required – see the instructions)
- I am ready to proceed with this application

Interpreter

Is an interpreter required?

- Yes No

If YES, please specify language

Warning

Section 216 of the *Queensland Civil and Administrative Tribunal Act 2009* makes it an offence for a person to knowingly give the registry documents containing false or misleading information.

Maximum penalty for such an offence – \$10,000.

SIGN AND DATE HERE

The information in this application is true to the best of my knowledge.

Applicant/s sign here

Date

If more than one applicant is named all must sign the application.

