



Administrative Decisions Tribunal  
New South Wales

**APPLICATION FOR ORIGINAL DECISION**

Legal Profession Act 2004

**LEGAL SERVICES DIVISION**

File number

*for office use only*

**APPLICATION**

This an application for

.....

Made pursuant to Section

.....

**PARTIES**

Applicant

.....

Respondent

.....

**ORDERS SOUGHT**

The applicant seeks the following order/s:

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**GROUND FOR APPLICATION (INCLUDING PARTICULARS)**

Ground 1

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Particulars 1.1

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Particulars 1.2

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Particulars 1.3

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Ground 2

Particulars 2.1

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Particulars 2.2

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Particulars 2.3

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Ground 3

Particulars 3.1

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Particulars 3.2

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Particulars 3.3

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**PARTY DETAILS**

**APPLICANT**

Name .....  
Address for service .....  
DX .....  
Phone .....  
Fax .....  
File Reference .....

**RESPONDENT**

**Details of Respondent**

Name .....  
Address for service .....  
DX .....  
Phone .....  
Fax .....  
File Reference .....

**SIGNATURE**

Signed by .....  
Name .....  
On behalf of .....  
Date .....

**REGISTRY DETAILS**

Level 15, St James Centre, 111 Elizabeth St Sydney 2000  
DX 1523 Sydney  
Phone 02 9223 4677 Freecall 1800 060 410  
Facsimile 02 9233 3283  
TTY 02 9235 2674  
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