

**NCAT** NSW Civil & Administrative Tribunal

# **Commercial list application**

CONSUMER AND COMMERCIAL DIVISION

Complete this form to apply for orders about the review of agent commissions or fees, agricultural tenancy or dividing fence disputes. Visit the NCAT website for information on how to complete this application form. You can also apply online using <u>NCAT Online Services</u>.

#### File Number

Office use only

## **1. DISPUTE DETAILS**

#### A. PLACE OF DISPUTE

Include suburb and postcode

#### B. WHAT IS YOUR DISPUTE ABOUT?

Agricultural tenancy (Agricultural Tenancies Act 1990)

**Dividing fence** (Dividing Fences Act 1991)

**Review of agent commissions and fees** (Property and Stock Agents Act 2002)

#### C. WHAT IS THE TOTAL VALUE OF THE CLAIM?

The work, services or goods are to the approximate value of:

## 2. APPLICANT

Α.	APPLICANT TYPE Tick the box that best describes the person or organisation making this application.			
	Agricultural tenancy: Landlord Tenant Other (please specify)			
	Dividing fence: Owner Adjoining owner Other (please specify)			
	Review of agent commissions and fees: Consumer Other (please specify)			
в.	<ul> <li>APPLICANT CONTACT DETAILS</li> <li>For multiple applicants attach details on a separate sheet.</li> </ul>			
	First name: Last name:			
	Organisation name (if applicable):			
	ACN/ABN:			
	Address:			

S

Telephone:
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Email:

If you provide an email address, NCAT will use your email as the address for service

C.	ARE YOU ABORIGINAL O	R TORRES STRAIT ISLANDER?			
•		Prefer not to answer			
	Yes - Aboriginal	— Yes - Torres Strait Islander	Yes - both Aboriginal and Torres Strait Islander		
D.	<ul> <li>APPLICANT REPRESENTATIVE DETAILS         If the applicant is represented the representative's contact details will be used as the applicant's address for service. Attact the authority to act for the applicant.     </li> </ul>				
	Legal Practitioner	Agent Other (p	lease specify)		
	First name:	Last na	ame:		
	Organisation name (if app	blicable):			
	ACN/ABN:				
	Address:				
	Telephone:				
	Email:				
	lf you pro	ovide an email address, NCAT will	use your email as the address for service		
3.	RESPONDENT				
<b>3.</b> A.	RESPONDENT TYPE				
	RESPONDENT TYPE Tick the box that best descr		ou are making the applicant against.		
	RESPONDENT TYPE		Other (please specify)		
	RESPONDENT TYPE Tick the box that best descr Agricultural tenancy:				
	RESPONDENT TYPE Tick the box that best descr Agricultural tenancy:	Landlord Tenant	Other (please specify)		
	RESPONDENT TYPE         Tick the box that best descr         Agricultural tenancy:         Dividing fence:       Owner	Landlord Tenant	Other (please specify) Other (please specify)		
Α.	RESPONDENT TYPE         Tick the box that best descr         Agricultural tenancy:         Dividing fence:         Ow         Review of agent commiss         RESPONDENT CONTACT	Landlord Tenant mer Adjoining owner sions and fees: Consumer	Other (please specify) Other (please specify)		
Α.	RESPONDENT TYPE         Tick the box that best descr         Agricultural tenancy:         Dividing fence:         Ow         Review of agent commiss         RESPONDENT CONTACT         For multiple respondents at	Landlord Tenant mer Adjoining owner sions and fees: Consumer	Other (please specify) Other (please specify) Other (please specify) /ou must provide the correct name and address for service for		
Α.	RESPONDENT TYPE         Tick the box that best descr         Agricultural tenancy:         Dividing fence:         Ow         Review of agent commiss         RESPONDENT CONTACT         For multiple respondents at each respondent.	Landlord Tenant mer Adjoining owner sions and fees: Consumer DETAILS tach details on a separate sheet. Last na	Other (please specify) Other (please specify) Other (please specify) /ou must provide the correct name and address for service for		
Α.	RESPONDENT TYPE         Tick the box that best descr         Agricultural tenancy:         Dividing fence:         Ow         Review of agent commiss         RESPONDENT CONTACT         For multiple respondents at each respondent.         First name:	Landlord Tenant mer Adjoining owner sions and fees: Consumer DETAILS tach details on a separate sheet. Last na	Other (please specify) Other (please specify) Other (please specify) /ou must provide the correct name and address for service for		
Α.	RESPONDENT TYPE         Tick the box that best descr         Agricultural tenancy:         Dividing fence:         Ow         Review of agent commiss         RESPONDENT CONTACT         For multiple respondents at each respondent.         First name:         Organisation name (if approximation name (if approx	Landlord Tenant mer Adjoining owner sions and fees: Consumer DETAILS tach details on a separate sheet. Last na	Other (please specify) Other (please specify) Other (please specify) /ou must provide the correct name and address for service for		
Α.	RESPONDENT TYPE         Tick the box that best descr         Agricultural tenancy:         Dividing fence:         Ow         Review of agent commiss         RESPONDENT CONTACT         For multiple respondents at each respondent.         First name:         Organisation name (if approx         ACN/ABN:	Landlord Tenant mer Adjoining owner sions and fees: Consumer DETAILS tach details on a separate sheet. Last na	Other (please specify) Other (please specify) Other (please specify) /ou must provide the correct name and address for service for		

# 4. ORDERS AND REASONS

#### A. WHAT ORDERS DO YOU WANT?

Write down the sections, the Act and the orders you want NCAT to make. For more information visit the NCAT website.

#### B. WHY ARE YOU APPLYING TO NCAT?

Explain why you are asking NCAT to make the above orders. This will help NCAT and the respondent understand why you have made this application.

# 5. LANGUAGE AND DISABILITY SUPPORT

#### A. INTERPRETER

Do you need an interpreter for the hearing?

No Yes (specify language):

#### **B. SUPPORT REQUIREMENTS**

Do you have a disability-related need or other request for support at the hearing?

### 6. SIGNATURE

Applicant's signature or signature of representative.

Name

#### Signature

Date

Lodge your application and pay the fee with NCAT Online Services or at your nearest NCAT Registry For NCAT Consumer and Commercial Division Registry locations visit the <u>NCAT website</u>. For all NCAT enquiries telephone 1300 006 228 or visit www.ncat.nsw.gov.au.