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Dispute Resolution Service

Adjudication Application (Northern Territory)

Made under the *Construction Contracts (Security of Payments) Act (Northern Territory)*

Please complete all details of this application where applicable

	Claim Value (\$)		Application Fee
Applicable Application Fee (payment claim value inc. GST)	0 – 200,000	<input type="checkbox"/>	\$220.00 inc. GST
	200,001 – 500,000	<input type="checkbox"/>	\$330.00 inc. GST
	500,001 – 1 Million	<input type="checkbox"/>	\$440.00 inc. GST
	Above 1 Million	<input type="checkbox"/>	\$660.00 inc. GST

*Please refer to the relevant terms and conditions prior to making an application, refer page 5.
Please complete all applicable details below and take care particularly in regards to the business details of the respondent and the contract. All details must be correctly completed.*

Applicant Details

Name of business (and trading name if applicable)						
Business Address (number, street, suburb, state and postcode)						
Postal Address						
Phone Number / Fax Number	/					
Email Address						
Contact person						
Applicant Type (Please select one)	Pty Ltd Company	<input type="checkbox"/>	Limited Company	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
	Sole Trader	<input type="checkbox"/>	Trust	<input type="checkbox"/>	Incorporated Association	<input type="checkbox"/>
Applicant Business Type (please select one)	Trade Contractor/ Subcontractor	<input type="checkbox"/>	General / Main / Head Contractor	<input type="checkbox"/>	Project Manager	<input type="checkbox"/>
	Consultant	<input type="checkbox"/>	Supplier	<input type="checkbox"/>	Surveyor	<input type="checkbox"/>
	Designer	<input type="checkbox"/>	Developer /Client	<input type="checkbox"/>	Other [Describe]	<input type="checkbox"/>



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Applicant Trade (i.e. building, tiling, development etc)						
ABN / ACN (Provide both if applicable)	ABN:				ACN:	
Respondent Details						
Name of business (and trading name if applicable)						
Business Address (number, street, suburb, state and postcode)						
Postal Address						
Phone Number / Fax Number	/					
Email Address						
Contact person						
Respondent Type (Please select one)	Pty Ltd Company	<input type="checkbox"/>	Limited Company	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
	Sole Trader	<input type="checkbox"/>	Trust	<input type="checkbox"/>	Incorporated Association	<input type="checkbox"/>
Respondent Business Type (please select one)	Trade Contractor/ Subcontractor	<input type="checkbox"/>	General / Main / Head Contractor	<input type="checkbox"/>	Project Manager	<input type="checkbox"/>
	Consultant	<input type="checkbox"/>	Supplier	<input type="checkbox"/>	Surveyor	<input type="checkbox"/>
	Designer	<input type="checkbox"/>	Developer /Client	<input type="checkbox"/>	Other [Describe] _____	<input type="checkbox"/>
Respondent Trade (i.e. building, tiling, development etc)						
ABN / ACN (Provide both if applicable)	ABN:				ACN:	
Contract and Project Details						
Project Name						
Project Address						
Project Type (e.g. building apartments)						
Contract Number						



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Contract Type (Written, Oral, Part Written / Part Oral)		
Date Contract Formed		
Payment Claim Reference Number		
Date of Payment Claim		
Date Payment Claim served on Respondent		
Payment Claim Amount (inc GST)		
Due Date for Payment		
Notice of Dispute (tick if applicable)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Date of Notice of Dispute		
Date Notice of Dispute served on Applicant		
Notice of Dispute Amount (inc GST)		
Further information/points in support of in support of claim:		
Service of this application		
The date applicant served this application on the respondent OR the date applicant intends to serve this application. (including all submissions)		



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Application Checklist

Please make sure you consider the following items	
This application refers to a valid payment claim.	<input type="checkbox"/>
This application is accompanied by a copy of the payment claim.	<input type="checkbox"/>
Was a Notice of Dispute issued?	<input type="checkbox"/>
This application is accompanied by a copy of the Notice of Dispute.	<input type="checkbox"/>
A copy of the relevant contract is included. If a written contract does not exist, a document referring to the terms of the verbal agreement.	<input type="checkbox"/>
This application may also be accompanied by relevant submissions (E.g. legal submissions, statutory declarations, emails, previous invoices, expert reports, faxes, other relevant communication).	<input type="checkbox"/>
This application contains information regarding the service of documents on the respondent, including the payment claim, notice of intent to apply for adjudication as well as the adjudication application.	<input type="checkbox"/>

Please Note the following:

- The Applicant **is required** to serve a copy of the adjudication application (including all attachments) to the respondent.
- If it is not served on the same day the Applicant will immediately notify the Prescribed Appointor of the date of service upon the respondent and provide evidence of service.

The claimant hereby applies for adjudication under section 28 of the Construction Contracts (Security of Payments) Act of the progress payment to be made in respect to the payment claim.

By signing this application, the applicant submits that all information entered above is correct, particularly with regards to contact and business details for both parties.

Signed (applicant):

Date: _____



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Terms & Conditions of Application (NT)

Please make yourself aware of the following terms and conditions for the adjudication regime you are applying under.

- 1.1. **Adjudication Application Fee: The following fee schedule is based on the value of the payment claim inc GST**
 - 1.1.1. Application fees are as follows:
 - 1.1.1.1.1. For payment claim amounts from \$0 – \$200,000 the application fee is: \$220.00 inclusive GST
 - 1.1.1.1.2. For payment claim amounts from \$200,001 – \$500,000 the application fee is \$330.00 inclusive GST
 - 1.1.1.1.3. For payment claim amounts from \$500,001 to \$1,000,000 the application fee is \$440.00 inclusive GST
 - 1.1.1.1.4. For payment claim amounts above \$1,000,000 the application fee is \$660.00 inclusive GST
 - 1.1.2. The Certificate of Determination is \$220.00 inclusive GST.
 - 1.1.3. Disbursements are charged at cost price.

I confirm that I have read and understand all the relevant terms and conditions for the adjudication scheme under which I am applying.

Signature

Date:



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Submission of Application

This adjudication application must be served on the RICS Dispute Resolution Service. It can be done in the following ways. **By post or delivery** to either of the following addresses:

RICS DRS Main Office	Darwin serviced Office
<p>Business/Courier Address:</p> <p>RICS Dispute Resolution Service</p> <p>Suite 317, 60 Martin Place, Sydney, NSW 2000</p> <p>Postal Address:</p> <p>RICS Dispute Resolution Service As above</p>	<p>Address:</p> <p>RICS Dispute Resolution Service</p> <p>Suite G1, Paspalis Centrepoint Business</p> <p>Centre Level 1,</p> <p>48-50 Smith Street</p> <p>Darwin NT 0800</p>

Or by fax: 1300 953 529

Or by email: drsaus@rics.org



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Application Fee Tax Invoice

Section 1 of the terms and conditions included with this application indicate the relevant application fee.

Please complete the following details. The adjudication application fee will be deemed invalid if upfront payment is not received with the application (as per the terms and conditions of application).

Payment Method (Tick appropriate)

- Cheque (Payable to RICS Dispute Resolution Service)
- EFT (Bank Details - ANZ BSB: 012 019 Account Number: 481694188)

Credit Card

- MasterCard
- Visa
- Amex

Card Details

Cardholder

Card number

Expiry date /

Amount \$ *(Please remember to include GST)*

Signature

Once this form is completed, it will act as a tax invoice. Please retain for tax purposes.

There is a merchant fee on credit card transactions equivalent to a 2.5% for all AMEX/ MasterCard/Visa transactions.