# Adjudication Application (Northern Territory)

Made under the *Construction Contracts (Security of Payments) Act 2004 (Northern Territory)*

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| **Please complete all details of this application where applicable** | | | | | | | | | | | | | | |
| **Application Fee** | **Payment Claim Value ($)** | | | | |  | **Application Fee** | | | | | | | |
|  | All values | | | | |  | $0.00 | | | | | | | |
| ***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 |  | Limited Company | | | | | |  | | Partnership | |  |
|  | | Sole Trader |  | Trust | | | | | |  | | Incorporated Association | |  |
| Applicant Business Type (please select one) | | Trade Contractor/ Subcontractor |  | General / Main / Head Contractor | | | | | |  | | Project Manager | |  |
|  | | Consultant |  | Supplier | | | | | |  | | Surveyor | |  |
|  | | Designer |  | Developer /Client | | | | | |  | | Other [Describe] | |  |
| 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 |  | | Limited Company | | | | |  | Partnership | |  | |
|  | | Sole Trader |  | | Trust | | | | |  | Incorporated Association | |  | |
| Respondent Business Type (please select one) | | Trade Contractor/ Subcontractor |  | | General / Main / Head Contractor | | | | |  | Project Manager | |  | |
|  | | Consultant |  | | Supplier | | | | |  | Surveyor | |  | |
|  | | Designer |  | | Developer /Client | | | | |  | Other [Describe] | |  | |
| 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 | |  | | | | | | | | | | | | |
| 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 | | | | | | | No | | | | | |
| 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) | |  | | | | | | | | | | | | |

**Terms & Conditions of Application (NT)**

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

* 1. **Adjudication Application Fee:**
  2. AIQS does not charge an adjudication application fee to applicants.
  3. AIQS charges an appointment fee of 15% of the adjudicator’s fee from the adjudicator which is included in the adjudicator’s published hourly rate. The appointment fee is not in addition to the adjudicator’s published hourly rate fee.

|  |  |
| --- | --- |
| I confirm that I have read and understand all the relevant terms and conditions for the adjudication application. |  |
| Signature ………………………………………………………….. | Date: |

**Application Checklist**

|  |  |
| --- | --- |
| **Please make sure you consider the following items** | |
| This application refers to a valid payment claim. |  |
| This application is accompanied by a copy of the payment claim. |  |
| Was a Notice of Dispute issued? |  |
| This application is accompanied by a copy of the Notice of Dispute. |  |
| 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. |  |
| This application may also be accompanied by relevant submissions  (e.g. legal submissions, statutory declarations, emails, previous invoices, expert reports, faxes, other relevant communication). |  |
| This application contains information regarding the service of documents on the respondent, including the payment claim as well as the adjudication application. |  |

**Please Note the following:**

* The Applicant **is required** to serve a copy of the adjudication application (including all attachments) on 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 applicant hereby applies for adjudication under section 28 of the *Construction Contracts (Security of Payments) Act 2004* 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:

**Submission of Application**

This adjudication application must be served on AIQS . It can be done in the following ways.

**By post or delivery** to AIQS c/- ABC DRS at any of the following addresses:

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| **ABC DRS Northern Territory Office** |
| Business/Courier/Postal Address:  ABC Dispute Resolution Service  Darwin Innovation Hub. Level 1,  48-50 Smith Street Mall, Darwin NT 0800  Office hours: 8:00 am to 5:00 pm (local time) |
| **ABC DRS Queensland Office (Head office)** |
| Business/Courier Address:  ABC Dispute Resolution Service  Level 34, Waterfront Place  1 Eagle Street, Brisbane, QLD, 4000.  Office hours: 8.30 am to 5.00 pm (local time)  Postal Address:  ABC Dispute Resolution Service  PO Box 307  Waterfront Place,  Brisbane, QLD, 4001 |
| **ABC DRS ACT Office** |
| Business/Courier/Postal Address:  ABC Dispute Resolution Service  Level 1, The Realm. 18 National Circuit,  Barton ACT 2600  Office hours: 8.30 am to 5.00 pm (local time |
| **ABC DRS New South Wales Office** |
| Business/Courier/Postal Address:  ABC Dispute Resolution Service  Level 5, 115 Pitt Street.  Sydney NSW 2000  Office hours: 8.30 am to 5.30 pm (local time) |
| **ABC DRS South Australia Office** |
| Business/Courier/Postal Address:  ABC Dispute Resolution Service  Level 2, 70 Hindmarsh Square,  Adelaide, SA 5000  Office hours: 8.30 am to 5.00 pm (local time) |
| **ABC DRS Tasmania Office** |
| Business/Courier/Postal Address:  ABC Dispute Resolution Service  Level 3, 85 Macquarie Street,  Hobart, TAS 7000  Office hours: 8.15 am to 5.15 pm (local time) |
| **ABC DRS Western Australia Office** |
| Business/Courier/Postal Address:  ABC Dispute Resolution Service  AMP Tower, Level 28, 140 Georges Terrace,  Perth, WA 6000  Office hours: 8.45 am to 5.15 pm (local time) |

So that we can process your adjudication application efficiently please contact us prior to lodging any applications at any of our offices above either by email ([contact@ricsdrs.com.au](mailto:contact@ricsdrs.com.au)) or phone us on 1300 857 383.

**Or by fax**: 1300 857 384

**Or by email**: [contactus@abcdrs.com.au](mailto:contactus@abcdrs.com.au)

**Or by ABC DRS “Hightail’ file sharing platform account**:  [https://spaces.hightail.com/uplink/abcdrs](%20https:/spaces.hightail.com/uplink/abcdrs%20)