

APPLICATION TO REGISTER AN INTERSTATE GUARDIANSHIP ORDER

Guardianship of Adults Act 2016 (s. 54)

A - PERSON YOU ARE APPLYING ABOUT ('THE ADULT')

First name/s:

Surname:

Is the adult known by any other names? If so please specify:

Gender:

Date of birth:

Identifies as (tick one):

Aboriginal but not Torres Strait Islander ☐

Torres Strait Islander but not Aboriginal ☐

Both Aboriginal & Torres Strait Islander ☐

Neither Aboriginal nor Torres Strait Islander ☐

Residential address:

Current address (if not the same as residential address):

E-mail:

Landline phone:

Mobile phone:

Hospital Registration Number - HRN (if known):

B - APPLICANT/S INFORMATION

First Name/s:

Surname:

Postal Address:

E-mail:

Landline phone:

Mobile phone:

Your relationship to the adult:

Important: The use of electronic media for the exchange of documents and other important information in NTCAT proceedings is strongly encouraged. If you are able to provide an email address it will be used for the service of documents and notices. If you have provided a mobile phone number NTCAT may send you SMS text messages with notifications about your matter.

C - DETAILS OF INTERSTATE GUARDIANSHIP ORDER

Please **attach** a copy of the order to this application (if available).

State/Territory in which original order was made:

Court or tribunal:

Date of order:

Duration of order:

Guardian details (attach separate sheet if more than two – contact details are unnecessary if guardian is also the applicant):

Guardian 1:

First Name/s:

Surname:

Postal Address:

E-mail:

Landline phone:

Mobile phone:

Guardian 2:

First Name/s:

Surname:

Postal Address:

E-mail:

Landline phone:

Mobile phone:

D - REASONS FOR THE APPLICATION

Please briefly state the reasons for seeking to have the guardianship order registered in the Northern Territory:

F - URGENT MATTERS

Is there an urgent need for registration of the interstate order? (Please only answer 'yes' in **genuine** circumstances of urgency.)

☐ Yes ☐ No

If 'yes', please set out the circumstances of urgency:

SIGNATURE

IMPORTANT: By signing this form you declare that to the best of your knowledge information and belief:

- *the interstate guardianship order remains in force; and*
- *there are no circumstances that might lead to the revocation or variation of the guardianship order by the issuing court or tribunal.*

Signature of applicant or applicant's representative:¹ _____

Name of applicant or applicant's representative: _____

Date: _____

¹ A person signing as representative of a party warrants to NTCAT that he/she has the lawful authority to do so.