

FORM AG6 (February 2020 revision)

File No.

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:				

Landli	ne phone:		
Mobile	e phone:		
Your r	elationship 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 - D	DETAILS OF INTERSTATE GUARDIANSHII	PORDER	
Please	e attach a copy of the order to this applicatio	n (if available).	
State/	Territory in which original order was made:		
Court	or tribunal:		
Date o	of order:		
Durati	on of order:		
	lian details (attach separate sheet if more thatian is also the applicant):	n two – contact details are unnecessary if	
	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
1 - OKOLNI MATTEKO
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.