# Application for Arbitration

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| **Form 6** Family Law Regulations 2024 Section 24 | | | | | |
| **Please type or print clearly** and mark [**X**] all boxes that apply. Attach extra pages if you need more space to answer any questions.  Filed in:  Federal Circuit and Family Court of Australia (Division 1)  Federal Circuit and Family Court of Australia (Division 2)  Family Court of Western Australia  Other (specify)  **Filed on behalf of:** Full name: | | | | | File number  Filed on  Hearing date  Hearing time |
| MARK [**X**] IN THE BOX THAT APPLIES TO YOU  Applicant  Respondent  Other (specify) | | | | | |
|  | | Application | | | |
| The parties seek an order referring the matter, details of which are given below, to arbitration. | | | | | |
|  | | Notice | | | |
| Take notice that:   * this application is set down for hearing before the Court * if you do not appear at the hearing, the Court may hear and decide the matter in your absence. | | | | | | |
|  | | | | | | |
| Part A | | Details of parties | | | |
|  | Names of the parties making this application – *give details for each* | | | | |
|  | Family name (surname) as used now | | | Given names | |
|  |  | |  |  | |
|  | Family name (surname) as used now | | | Given names | |
|  |  | |  |  | |
|  | Family name (surname) as used now | | | Given names | |
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**Attach extra page if you need more space.**

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|  | Postal address and email address for service of documents on each applicant | | |
|  | **Applicant 1** | send to solicitor/s in 3  other  give details: | |
|  |  | | |
|  |  | | State       Postcode |
|  | Phone | | |
|  | Email | | |
|  |  | | |

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|  | **Applicant 2** | send to solicitor/s in 3  other  give details: | |
|  |  | | |
|  |  | | State       Postcode |
|  | Phone | | |
|  | Email | | |
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**Attach separate sheet for any others**

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|  | Solicitor for each applicant | | | |
|  | **Applicant 1** |  | | |
|  | Name | | | |
|  | Firm name | | | |
|  | Address | | | State       Postcode |
|  | Phone | | | |
|  | Email | | Lawyer’s code | |

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|  | **Applicant 2** |  | | |
|  | Name | | | |
|  | Firm name | | | |
|  | Address | | | State       Postcode |
|  | Phone | | | |
|  | Email | | Lawyer’s code | |

**Attach separate sheet for any others**

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| Part B | **Details of issue(s) to be arbitrated** |

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|  | **NUMBER EACH PARAGRAPH AND ATTACH EXTRA PAGE/S IF YOU NEED MORE SPACE.** |
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| Part C | **Details of arbitrator** |

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|  | If the parties have agreed on an arbitrator, give brief details of the proposed arbitrator, including name and address.  **NUMBER EACH PARAGRAPH AND ATTACH EXTRA PAGE/S IF YOU NEED MORE SPACE.** |
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| Part D | | **Signature** | | | |
|  |  | |  |  |
| Signed | | |  | Date |
|  | | |  | /     / |

This application was signed by  applicant(s)

solicitor for applicant(s)

This application was prepared by  applicant

solicitor

counsel

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|  |  |
|  | PRINT NAME AND LAWYER’S CODE |