# 2023/24 VARIATION OF A PRACTISING CERTIFICATE TO PRACTISE AS A PRINCIPAL OF A LAW PRACTICE



THIS IS AN APPLICATION FOR VARIATION OF AN AUSTRALIAN PRACTISING CERTIFICATE FOR THE 2023/24 PRACTISING YEAR.

- To be completed by Australian legal practitioners who intend to practise as a sole practitioner, partner, ILP principal or supervising legal practitioner at a community legal service.
- Applications for practising certificates in New South Wales are made in accordance with legal profession legislation (as defined in the Legal Profession Uniform Law Application Act 2014).
- Please ensure that you read the explanatory notes on page 3 before completing this application.
- An application that fails to provide mandatory information, or provides incomplete or misleading information, will be treated as an incomplete application.
- · Please ensure that you read the personal information collection notice on page 4 before completing this application
- · All questions are mandatory except where indicated otherwise.

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|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|--|--|--|
| 1. APPLICANT DETAILS                                                                                                           |                                                 |  |  |  |
| Surname:                                                                                                                       | First name:                                     |  |  |  |
| Other names:                                                                                                                   | Law Society number:                             |  |  |  |
| 2. DETAILS OF THE VARIATION (NOTE A)                                                                                           |                                                 |  |  |  |
| I intend to commence practice in the following manner and wish to apply for the appropriate practising certificate:            |                                                 |  |  |  |
| Sole practitioner                                                                                                              |                                                 |  |  |  |
| Partner                                                                                                                        |                                                 |  |  |  |
| ILP Principal                                                                                                                  |                                                 |  |  |  |
| Supervising legal practitioner at a community legal service                                                                    |                                                 |  |  |  |
| Date of Commencement (DD/MM/YYYY): / / / / / / / / / / / / / / / / / / /                                                       |                                                 |  |  |  |
| O WILL VOLUDE DE ACTIONIO WITH A NEW OR EVICTINO L                                                                             | ANY DRAGTIOSO (NOTE D)                          |  |  |  |
| 3. WILL YOU BE PRACTISING WITH A NEW OR EXISTING LAW PRACTICE? (NOTE B)                                                        |                                                 |  |  |  |
| Name of law practice:                                                                                                          |                                                 |  |  |  |
| Is this variation related to establishing a new law practice?                                                                  |                                                 |  |  |  |
| Yes (please proceed to section 4)                                                                                              |                                                 |  |  |  |
| No (please proceed to section 5)                                                                                               |                                                 |  |  |  |
| 4. NEW LAW PRACTICE                                                                                                            |                                                 |  |  |  |
| Name of law practice:                                                                                                          |                                                 |  |  |  |
| On what date will the new law practice commence? (DD/MM/YYYY): //                                                              |                                                 |  |  |  |
| New law practice type: (please refer to the definitions in s.6 of the Legal Profes                                             | sion Uniform Law (NSW))                         |  |  |  |
| A sole practice.                                                                                                               |                                                 |  |  |  |
| An incorporated legal practice (ILP). Please complete the ILP Notice of Int                                                    | ention to Engage form in addition to this form. |  |  |  |
| A law firm (i.e. a partnership).                                                                                               | . <del>.</del>                                  |  |  |  |
| An unincornorated legal practice (IJLP). Please complete the IJLP Notice of Intention to Engage form in addition to this form. |                                                 |  |  |  |

### **5. LAW PRACTICE DETAILS**

| Street address:                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                    |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Street number and name:                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                    |  |
| Suburb:                                                                                                                                                                                                                                                                                                                                    | State:                                                                                                                                                                             |  |
| Country:                                                                                                                                                                                                                                                                                                                                   | Postcode: DX:                                                                                                                                                                      |  |
| Preferred postal address:                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                    |  |
| Same as above Other (please specify below)                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                    |  |
| Street number and name:                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                    |  |
| Suburb:                                                                                                                                                                                                                                                                                                                                    | State:                                                                                                                                                                             |  |
| Country:                                                                                                                                                                                                                                                                                                                                   | Postcode: DX:                                                                                                                                                                      |  |
| Other contact details:                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                    |  |
| Telephone:                                                                                                                                                                                                                                                                                                                                 | Fax:                                                                                                                                                                               |  |
| Mobile:                                                                                                                                                                                                                                                                                                                                    | Email address:                                                                                                                                                                     |  |
| Publication email address (if different):                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                    |  |
| Website:                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                    |  |
| 6. CONDITION 2 - SUPERVISED LEGAL PRACTICE (NOTE C)  Is your current practising certificate subject to Condition 2 (the requirement to e  Yes (please complete the Supervised Legal Practice Guidelines application a  No                                                                                                                  |                                                                                                                                                                                    |  |
| 7. CONDITION 3 - PRACTICE MANAGEMENT COURSE (NOTE  Have you completed a Practice Management Course to remove Condition 3 from y  Yes  No (A Practice Management Course must be completed before being author                                                                                                                               | ur practising certificate?                                                                                                                                                         |  |
| 8. DECLARATION                                                                                                                                                                                                                                                                                                                             | for a variation of my current practicing cartificate with affect from the date                                                                                                     |  |
| I declare that the contents of this application are true and correct. I wish to apply shown on this form. I undertake to comply with professional indemnity insurance am not aware of any matter (including a finding, conduct or event) referred to in a Cause event within the meaning of section 87 of the Legal Profession Uniform Law | requirements in accordance with the <i>legal profession legislation.</i> I declare that<br>ule 13(1) of the <i>Legal Profession Uniform General Rules 2015</i> or any Automatic St |  |
| Signed:                                                                                                                                                                                                                                                                                                                                    | Dated (DD/MM/YYYY):                                                                                                                                                                |  |
|                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                    |  |

#### 9. SCHEDULE OF FEES AND PAYMENT

#### **Schedule of Fees:**

| Practising Certificate Category                   | <b>Fidelity Fund Contribution</b> | If you are moving from a corporate, government or volunteer practising certificate, the Fidelity Fund Contribution will be payable. |
|---------------------------------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Law Practice Principal or Employee                | \$90                              | Please note that the Fidelity Fund Contribution does not attract GST.                                                               |
| Payment details:                                  |                                   |                                                                                                                                     |
| Cheque/money order (made payable to The           | Law Society of New South Wales a  | nd attached to application form)                                                                                                    |
| <b>EFTPOS</b> (payment to be made in person at th | ne Law Society)                   |                                                                                                                                     |
| O Credit card                                     |                                   |                                                                                                                                     |
| Amount to be charged: \$                          | Card type: Ar                     | mex $\bigcirc$ Mastercard $\bigcirc$ Visa                                                                                           |
| Card number: / /                                  |                                   | / Expiry date: /                                                                                                                    |
| Cardholder's name:                                |                                   |                                                                                                                                     |
|                                                   |                                   |                                                                                                                                     |
| Cardholder's signature:                           |                                   |                                                                                                                                     |

#### **GENERAL NOTES**

#### Application and practice notes

- An application that fails to provide mandatory information (including payment), or provides incomplete or misleading information, will be treated as an incomplete application.
- An incomplete application will be treated as 'not received' for the purposes
  of the legal profession legislation, and will be returned to the applicant.
  It will then be up to the applicant to decide whether or not to proceed
  with the application.
- If the applicant wishes to proceed, the applicant will need to resubmit
  their application by completing the missing/incomplete information in their
  original application and redeclaring the same application. Until the requisite
  information is provided, the Law Society Council will not consider varying a
  practising certificate.
- A practising certificate will not be granted unless professional indemnity insurance requirements are met. A law practice must have professional indemnity insurance cover before commencing to engage in legal practice.
   This insurance must be maintained at all times while engaged in legal practice.

#### **EXPLANATORY NOTES**

Please read the following notes carefully to ensure that any required additional documents are provided.

#### Note A: Details of the change

If you are commencing practice as a supervising legal practitioner at a community legal service, you will be required to complete the relevant professional indemnity insurance exemption form and the under taking by a solicitor engaging in legal practice as a principal at a community legal service form which are available on the Law Society's website.

If you are commencing practice as a principal of an incorporated legal practice, you must provide a current ASIC company extract showing your appointment as a director of the company.

#### **Note B: Practice details**

If you intend on using a business name it must be registered with ASIC.

If a new incorporated legal practice is being established, at least 14 days notice must be given to the Law Society in writing by completing the incorporated legal practice notification form, which is available on the Law Society website, and you must provide:

- the ASIC certificate of registration for the company; and
- a current ASIC company extract showing your appointment as a director of the company.

#### **Note C: Additional requirements**

If your practising certificate is currently subject to condition 2, a submission by way of a statutory declaration addressing the Supervised Legal Practice Guidelines will need to accompany this application. This application will need to be determined prior to your commencement as a principal. An application for the removal of condition 2 is available on the Law Society's website.

All practitioners seeking to vary their practising certificate to that of a principal must satisfy the Law Society that they have complied with Condition 3 of their practising certificate. Condition 3 requires that the holder must complete a Practice Management Course (PMC) before being authorised to engage in legal practice as a principal of a law practice. This discretionary condition is imposed pursuant s 53 Legal Profession Uniform Law (NSW) and Rule 16(b)(ii) Legal Profession Uniform General Rules 2015.

#### PERSONAL INFORMATION COLLECTION NOTICE

By completing this form you are providing personal information to The Law Society of New South Wales (we, us, or our).

By lodging this application, you confirm that you have read the Personal Information Collection Notice and that you consent to The Law Society of New South Wales' collection, use and disclosure of information in accordance with that Notice. If you have any questions regarding the Personal Information Collection Notice please contact our Privacy Officer using the contact details below, prior to lodging this application.

#### Who do we collect the personal information from?

We generally collect your personal information directly from you. However, in some cases, we may receive your personal information from a third party (for instance if we receive a complaint) and when it is relevant to our statutory responsibilities (for instance other regulators who have dealt with you).

## What are the purposes for which we collect and hold personal information?

We collect and hold your personal information to:

- fulfil our functions under, facilitate compliance with, and carry out our
  responsibilities in connection with, the Legal Profession Act 2004 (NSW),
  the legal profession legislation (as defined in the Legal Profession Uniform
  Law Application Act 2014), the Corporations Act 2001 (Cth), the Professional
  Standards Act 1994 (NSW) and associated regulations (which require and
  authorise us to collect certain information) including to maintain regulatory
  and corporate records;
- fulfil our role as a professional association including:
  - · maintaining membership records
  - communicating with you to offer products, services and events and when you obtain a product or service or come to an event
  - · to conduct research and provide public representation; and
- provide information to third parties as authorised or required by law.

#### What if we didn't collect this personal information?

Without your personal information we may not be able to process your application or request, perform our statutory functions or provide you with some or all of the services of the Law Society as a professional association.

## Who are the types of bodies and persons to whom we usually disclose your personal information?

Your personal information may be provided to:

- entities distributing information relevant to you as a legal practitioner or member of the Law Society;
- Lawcover and other professional indemnity insurers and practising certificate funders:
- our professional advisors and contractors (strictly on the basis that the information is to be used only for providing services to the Law Society and must not be disclosed);
- Australian regulators and government entities (such as the Office of the Legal Services Commissioner) and overseas regulators; and
- organisations that represent the legal profession such as the Law Council of Australia and Regional Law Societies.

#### Disclosure overseas

If you practise in a foreign country (or apply to do so) we may send your personal information overseas in response to an inquiry from the relevant authority in that place.

We use the services of certain third party service providers which may have offices or other operations outside of Australia. As a result, your personal information may be disclosed to overseas recipients. All service providers that have access to personal information held by us are required to keep the information confidential and not to make use of it for any purpose other than to provide services in accordance with their engagement.

#### You can access and correct your personal information

Our privacy policy contains information about how you may access your personal information and seek correction of such information; as well as how to complain about a breach of the Australian Privacy Principles and how we will deal with such a complaint. Our privacy policy is accessible via lawsociety.com.au/privacy-policy

#### How to contact us for privacy related issues PRIVACY OFFICER

Corporate Legal Services The Law Society of New South Wales 170 Phillip Street, SYDNEY NSW 2000

Telephone: (02) 9926 0333 Fax: (02) 9231 5809

Email: corplegal@lawsociety.com.au

#### PLEASE DO NOT RETURN THIS FORM TO THE PRIVACY OFFICER

Please see the footer of each page for lodgement address details.