



**DISPUTES TRIBUNALS AMENDMENT RULES 1999**

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MICHAEL HARDIE BOYS, Governor-General

ORDER IN COUNCIL

At Wellington this 26th day of July 1999

Present:

THE RIGHT HON JENNY SHIPLEY PRESIDING IN COUNCIL

PURSUANT to section 60 of the Disputes Tribunals Act 1988, His Excellency the Governor-General, acting by and with the advice and consent of the Executive Council, makes the following rules.

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ANALYSIS

1. Title and commencement
2. Application for rehearing
3. Transfer of proceedings from District Court or High Court to Tribunal
4. Plaintiff in proceedings transferred to Tribunal to lodge claim

5. Forms substituted

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SCHEDULE

Forms Substituted in Schedule

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RULES

**1. Title and commencement**—(1) These rules may be cited as the Disputes Tribunals Amendment Rules 1999, and are part of the Disputes Tribunals Rules 1989\* (“the principal rules”).

(2) These rules come into force on 13 September 1999.

**2. Application for rehearing**—The principal rules are amended by revoking rule 23, and substituting the following rule:

“23. Every application for a rehearing under section 49 of the Act must specify the grounds on which the application is made.”

\*S.R. 1989/34

Amendment 1997: S.R. 1997/323

Amendment 1998: S.R. 1998/224

Amendment (No. 2) 1998: S.R. 1998/248

Amendment (No. 3) 1998: S.R. 1998/313

Amendment (No. 4) 1998: S.R. 1998/355

**3. Transfer of proceedings from District Court or High Court to Tribunal**—Rule 26 of the principal rules is amended by revoking subclauses (3) and (4), and substituting the following subclauses:

“(3) If proceedings are transferred to a Tribunal under section 37 (1) or section 37 (2) of the Act, the Registrar must, as soon as practicable,—

“(a) Notify all the parties to the proceedings that the proceedings are transferred; and

“(b) Request the plaintiff to lodge a claim form within 14 days of receipt of the request, or within such further time as the Registrar, on application, allows.

“(4) If the plaintiff lodges a claim form with the Registrar in accordance with subclause (3) (b), then the Registrar must fix a day and time for the hearing and must, as soon as practicable and at least 10 days before the hearing,—

“(a) Notify all parties to the proceedings of the time and place of the hearing; and

“(b) Send to the parties (other than the plaintiff) a copy of the claim.”

**4. Plaintiff in proceedings transferred to Tribunal to lodge claim**—(1) Rule 27 of the principal rules is revoked.

(2) Rule 5 (2) is consequentially amended by omitting the words “rule 27 of these rules”, and substituting the words “rule 26 (3) (b)”.

**5. Forms substituted**— The Schedule of the principal rules is amended by revoking forms 1, 2, 3, 4, 9, and 10, and substituting the forms 1, 2, 3, 4, and 10 set out in the Schedule.

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SCHEDULE  
FORMS SUBSTITUTED IN SCHEDULE

Rule 4

Form 1

### Disputes Tribunals Act 1988 Claim Form

**1** Applicant – you, the person or organisation making the claim

Name	
_____	
_____	
Address	
_____	
_____	
Postal address (if different from above)	
_____	
_____	
Home telephone	Other telephone

**2** Respondent – the person or organisation you are claiming against

Name	
_____	
_____	
Home address	
_____	
_____	
Work address (if known)	
_____	
_____	
Home telephone	Other telephone

**3** Other party (if any)

Name	
_____	
_____	
Home address	
_____	
_____	
Work address (if known)	
_____	
_____	
Home telephone	Other telephone

**4** Is this a claim that could be covered by your insurance company? Yes  No

Insurance company	
_____	
Postal address	
_____	
_____	

<b>COURT USE ONLY</b>	
District Court:	DT No:
<b>HEARING DETAILS</b>	
Date of hearing:	Time: am/pm
Place:	
Court officer’s signature:	Date:

**5** Details of your claim

Value of claim: \$ _____	
I claim that:	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
Continue on separate sheet if necessary	

**6** Contact you have had with the respondent and reason given by them for not paying

_____
_____
_____
_____
Continue on separate sheet if necessary

**7** Your signature and today’s date

Signature:	Date:
_____	_____

SCHEDULE—continued

FORMS SUBSTITUTED IN SCHEDULE—continued

Form 2

Rule 6 (1)

# Disputes Tribunals Act 1988 Notice of Hearing to Applicant

<b>COURT USE ONLY</b>	
District Court:	DT No:
<b>NOTICE OF DATE OF HEARING</b>	
Take notice that this claim will be heard by the Disputes Tribunal, as follows:	
Date of hearing:	Time: am/pm
Place:	
Court officer's signature:	Date:

**1 Applicant**

Name \_\_\_\_\_  
 \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

Postal address (if different from above) \_\_\_\_\_  
 \_\_\_\_\_

Home telephone \_\_\_\_\_ Other telephone \_\_\_\_\_

**5 Details of claim**

Value of claim: \$ \_\_\_\_\_

You claimed that:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Continuation sheet (if used) is attached*

**2 Respondent**

Name \_\_\_\_\_  
 \_\_\_\_\_

Home address \_\_\_\_\_  
 \_\_\_\_\_

Work address (if known) \_\_\_\_\_  
 \_\_\_\_\_

Home telephone \_\_\_\_\_ Other telephone \_\_\_\_\_

**3 Other party (if any)**

Name \_\_\_\_\_  
 \_\_\_\_\_

Home address \_\_\_\_\_  
 \_\_\_\_\_

Work address (if known) \_\_\_\_\_  
 \_\_\_\_\_

Home telephone \_\_\_\_\_ Other telephone \_\_\_\_\_

**6 Contact with respondent – you stated that you had the following contact with the respondent over this claim**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Continuation sheet (if used) is attached*

**4 Applicant's insurer (if applicable)**

Insurance company \_\_\_\_\_

Postal address \_\_\_\_\_  
 \_\_\_\_\_

**7 Applicant's signature**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SCHEDULE—continued

FORMS SUBSTITUTED IN SCHEDULE—continued

Rule 6 (2)

Form 3

Disputes Tribunals Act 1988  
Notice of Hearing and  
Particulars of Claim, to  
Respondent/Other  
Party

**COURT USE ONLY**

District Court: \_\_\_\_\_ DT No: \_\_\_\_\_

**NOTICE OF DATE OF HEARING**

Take notice that this claim will be heard by the  
Disputes Tribunal, as follows:

Date of hearing: \_\_\_\_\_ Time: \_\_\_\_\_ am/pm  
Place: \_\_\_\_\_

Court officer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

1 Applicant – the person or organisation  
claiming against you

Name  
\_\_\_\_\_

Address  
\_\_\_\_\_

Postal address (if different from above)  
\_\_\_\_\_

Home telephone \_\_\_\_\_ Other telephone \_\_\_\_\_

5 Details of claim

Value of claim: \$ \_\_\_\_\_

The applicant has claimed that:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Continuation sheet (if used) is attached*

2 Respondent – you, the person or organisation  
claimed against

Name  
\_\_\_\_\_

Home address  
\_\_\_\_\_

Work address (if known)  
\_\_\_\_\_

Home telephone \_\_\_\_\_ Other telephone \_\_\_\_\_

3 Other party (if any)

Name  
\_\_\_\_\_

Home address  
\_\_\_\_\_

Work address (if known)  
\_\_\_\_\_

Home telephone \_\_\_\_\_ Other telephone \_\_\_\_\_

6 Contact with respondent – the applicant has stated that they  
have had the following contact with you over this claim

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Continuation sheet (if used) is attached*

4 Applicant's insurer (if applicable)

Insurance company  
\_\_\_\_\_

Postal address  
\_\_\_\_\_

7 Applicant's signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SCHEDULE—*continued*

FORMS SUBSTITUTED IN SCHEDULE—*continued*

Form 4

Rule 8

<b>COURT USE ONLY</b>	
District Court:	DT No:

Disputes Tribunals Act 1988

# Acknowledgement from Applicant's Insurer

<small>Applicant</small>	<small>Respondent</small>	<small>Other party (if any)</small>
_____	_____	_____

Insurer

\_\_\_\_\_

**1** Waiver of notice under section 29

I, the insurer, do / do not require notice under section 25 of the above proceedings. (*Delete the option that does not apply.*)

**2** Subrogation under section 30

In this claim – the uninsured losses are: \$ \_\_\_\_\_  
                  – the insured losses are: \$ \_\_\_\_\_

I, the insurer,—

EITHER (a) abandon subrogation rights in respect of: \$ \_\_\_\_\_  
                  and wish to exercise subrogation rights in respect of the balance of the insured losses of: \$ \_\_\_\_\_

OR (b) abandon all subrogation rights

(*Delete the option that does not apply.*)

Insurance reference number

\_\_\_\_\_

Insurer's contact details

<small>Name</small>			
<small>Telephone:</small>	<small>Fax:</small>	<small>E-mail:</small>	_____

Insurer's signature

<small>Signature:</small>	<small>Date:</small>
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Applicant's signature

<small>Signature:</small>	<small>Date:</small>
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SCHEDULE—continued

FORMS SUBSTITUTED IN SCHEDULE—continued

Rule 24

Form 10

Disputes Tribunals Act 1988

Notice of Appeal

This Notice of Appeal must be filed within 28 days of the Disputes Tribunal's order (or approval of agreed settlement or variation of term of agreed settlement) or within such further time as a District Court Judge may, on application, allow.

1 Applicant - person or organisation making the original claim

Name
Address
Postal address (if different from above)
Home telephone Other telephone

2 Respondent - person or organisation originally claimed against

Name
Home address
Work address (if known)
Home telephone Other telephone

3 Other party (if any)

Name
Home address
Work address (if known)
Home telephone Other telephone

4 Applicant's insurance company (if applicable)

Insurance company
Postal address

COURT USE ONLY

District Court: DT No:
HEARING DETAILS
Date of hearing: Time: am/pm
Place:
Court officer's signature: Date:

5 Details of appeal

Note:
There is no general right of appeal against the decision of the Tribunal. The only grounds for an appeal are that the manner in which the Referee conducted the hearing, or the manner in which the investigator carried out the investigation, was—
(a) Unfair to you; AND
(b) Prejudicially affected the result of the proceedings or investigation.
Name of appellant (your name):
I, the appellant, appeal against the following:
(a) Proceedings conducted by a Referee / an investigation conducted by an investigator (delete what does not apply):
(b) An order / an approval of agreed settlement / a variation of the terms of an agreed order (delete what does not apply).
DT No:
Date of Tribunal decision:
Place of decision:
Give details of the unfairness and prejudicial effect:

Continue on separate sheet if necessary

Signature: Date:

Solicitor for appellant: (if any)

MARIE SHROFF,  
Clerk of the Executive Council.

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EXPLANATORY NOTE

*This note is not part of the rules, but is intended to indicate their general effect.*

These rules amend the Disputes Tribunals Rules 1989, and come into force on 13 September 1999.

*Clause 2* removes the requirement for the application for a rehearing to be in a prescribed form (form 9). Section 50 of the Disputes Tribunals Act 1989 does not require the application to be in a prescribed form and the Department for Courts will instead provide a standard form as a matter of practice.

*Clause 3* amends rule 26, to substitute a more streamlined procedure for when proceedings are transferred from a District Court or the High Court to a Tribunal.

*Clause 4* revokes rule 27, which is no longer needed as a result of changes made to rule 26.

*Clause 5* substitutes 5 new prescribed forms. All are designed to fit on one page of A4 paper in portrait, and to be easy for both the public and court staff to use. Form 1, the claim form, no longer includes provision for an agreement to extend jurisdiction. This will now be printed on a separate form provided by the Department for Courts.

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Issued under the authority of the Acts and Regulations Publication Act 1989.

Date of notification in *Gazette*: 29 July 1999.

These rules are administered in the Department for Courts.