

Form 49 Version 1	Application to amend certified agreement <i>Industrial Relations Act 2016, section 225</i> <i>(Form for approval of amendment of a certified agreement)</i>	R.176
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QUEENSLAND INDUSTRIAL RELATIONS COMMISSION
Industrial Relations Act 2016 section 225

(name of employer party or for a multi-employer agreement – name of new employer)

[AND]

[(name[s] of employee organisation[s])]

(Matter No. /20 /)

APPLICATION TO AMEND THE

(title of agreement)

- CERTIFIED AGREEMENT

TO: The Industrial Registrar, Industrial Registry, Level 21, Central Plaza 2, 66 Eagle Street, (Corner Creek and Elizabeth Streets), Brisbane 4000, GPO Box 373, Brisbane Q 4001
Phone: (07) 3227 8060 Fax: (07) 3221 6074

TAKE NOTICE that [I] [we] [a party] [the parties] [a person (new employer) who wants to be a party] to the certified agreement of _____, Register No CA _____, expiring _____ *(day, month and year)* _____ *(agreement number CA and year)* on _____, apply to amend the agreement. *(day, month and year)*

The amendment is set out in attachment A.

The matters required under the Act, regulations and rules are set out in the affidavit which is attachment B.

Dated: _____
(day, month and year)

[Signatures:

(new employer)

(print name)

Witnesses:

In the presence of:

(witness to sign)

(print name)]

[

(employer)

(print name)

In the presence of:

(witness to sign)

(print name)]

(or)

[Signed for the employer by: –

In the presence of:

(signature)

(witness to sign)

(print name)

(print name)

(position, title, office etc)]

[AND]

[Signed for the employee organisation by

In the presence of:

(signature of employee)

(witness to sign)

(print name)

(print name)

(position, title, office etc)]

[AND]

[Signed for the employee organisation by

In the presence of:

(signature of employee)

(witness to sign)

(print name)

(print name)

(position, title, office etc)]

(or)

[Signed for the employees by

In the presence of:

(signature of employee representative)

(witness to sign)

(print name)

(print name)

(position, title etc)]

APPROVED under the Industrial Relations Act section [169] [171]

Industrial Commissioner

DATED

(day, month and year)

End notes: This application must be accompanied by affidavit the contents of which satisfy the requirements of section 225 of the Act and R.176.

If the filer wants a copy of the filed application amendment and affidavit returned an original and 3 copies must be given to the Industrial Registry.

(Last page)

PARTICULARS OF THE EMPLOYER

Name:

Business address:

Address for service:

Phone number or contact phone number:

Fax number *(if any)*:

E-mail address *(if any)*:

[IF EMPLOYER HAS AN AGENT *(An appointment of agent form must accompany this application, R 12(1)(l)*

Employer's agent's name:

and corporation or business name:

Agent's business address:

Address for service:

Phone:

Fax:

E-mail address *(if any)*:]

PARTICULARS OF OTHER [PARTY] [PARTIES] *(The following information must be provided. If there is more than 1 other party this information must be given for each other party except if the agreement is between an employer and the employees then - only particulars of the employees' representative should be given. If a representative of a valid majority of the relevant employees bound by the agreement makes the application, then the particulars of the employees' representative must be given).*

Name:

Position, title, office etc: *(if applicable)*

Organisation, corporation, association, department business etc: *(if applicable)*

Residential or business address:

Address for service:

Phone or contact phone number:

Fax number: *(if any)*

E-mail address *(if any)*:]