Matter No	):		
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## Form 38 – Advice of intention to begin negotiations for a project or negotiated agreement

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Industrial Relations Act 2016, s 169, s 406W Industrial Relations (Tribunals) Rules 2011, r 167

## Information

- · Use this form to notify of an intention to begin negotiations for either a project or negotiated agreement.
- This notice must be given to the Queensland Industrial Relations Commission and the parties listed **at least 14 days** before negotiations are proposed to start.
- Please read this form carefully and complete all relevant sections.
- Documents which are longer than 30 pages in length must be provided to the Industrial Registry in hard copy before it will be accepted for filing.
- For further information please refer to the website <a href="www.qirc.qld.gov.au">www.qirc.qld.gov.au</a> or contact the Industrial Registry on 1300 592 987 or via email at <a href="mailto:qirc.registry@qirc.qld.gov.au">qirc.qld.gov.au</a>.

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Notification	
Advice is hereby given to the	Queensland Industrial Relations Commission, and the parties listed below, of an intention to ince with the <i>Industrial Relations Act 2016</i> , pursuant to [select one]:
s 169(2) (proje	ect agreement) s 406W(2) (independent couriers – negotiated agreement)
In the matter of a propose	d certified agreement between
Name of proposer:	
	AND
Proposed party:	
	AND
Proposed party:	
	AND
Relevant employee organisation [if applicable]:	
	AND
Relevant employee organisation [if applicable]:	
If there are more parties to the	e proposed agreement, please complete a <b>Form 1 – Parties List</b> and file it together with this form
1. Negotiation start date	
Negotiations are proposed to	begin on:
2. Proposed name of new	agreement

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3. Name of existing agreement [if applicable]						
Nominal expiry date of exisitng agreement:						
4. Particulars of the propo	ser					
Name:						
Postal/Service address:						
	Suburb/Town				Postcode	
Phone number:			Mobile number:			
Email address:						
Name of contact person:						
Direct phone number:			Mobile number:			
Direct email address:						
5. Signature of proposer						
Signature:						
Name:						
Position/Capacity:						
Date:						