

# Notice of intention to start practice in a Multi-Disciplinary Partnership in the ACT

Send to: Nicole Crossley, The Law Society of the ACT, [nicole.crossley@actlawsociety.asn.au](mailto:nicole.crossley@actlawsociety.asn.au)

## About this form

Before starting to provide legal services in this jurisdiction as a member of a multi-disciplinary partnership (MDP), a legal practitioner partner must give the Law Society written notice, in this form, of their intention to do so.

A multi-disciplinary partnership is defined under s 134 of the *Legal Profession Act 2006*.

### Part A: Business details

|  |  |
|--|--|
| Name of multi-disciplinary partnership |  |
| Registered business name               |  |
| Australian Business Number (ABN)       |  |
| Phone Number                           |  |
| Street Address                         |  |
| Postal Address (if different)          |  |
| DX number and location (if applicable) |  |
| Website                                |  |

|   |             |
|---|-------------|
| Date from which the legal practitioner partner intends to commence providing legal services in the ACT as a member of the MDP |             |
| Will this multi-disciplinary partnership take over the business of an existing law practice?                                  | Yes      No |
| If "Yes", please provide details of the existing law practice:  |             |
|   |             |



Part B: Structure of multi-disciplinary partnership

**Legal practitioner partners:** Full names of legal practitioner partners of the multi-disciplinary partnership and the jurisdiction in which their current practising certificate was issued. *Note: legal practitioner partners must hold an unrestricted practising certificate.*

| Full name/s | Jurisdiction in which current unrestricted practising certificate was issued |
|-------------|--|
|             |  |

**Non-legal practitioner partners:** Full names of all partners of the multi-disciplinary partnership that are not legal practitioners.

| Full name/s | Occupation |
|-------------|------------|
|             |            |

**Employee legal practitioner:** Full names of all non-partner Australian legal practitioners who are employed by the multi-disciplinary partnership.

| Full name/s | Jurisdiction in which current practising certificate was issued |
|-------------|---|
|             |   |





**Part C: Legal Practitioners Fidelity Fund Contribution**

A multi-disciplinary partnership may be required to make payments to or on account of the Legal Practitioners Fidelity Fund.

**Undertaking:** As a legal practitioner partner of the above multi-disciplinary partnership intended to be conducted, I hereby undertake to the Law Society to pay, within 28 days of notification of the amount, such contribution in respect of the multi-disciplinary partnership to the Legal Practitioners Fidelity Fund as may be determined in accordance with the provisions of the *Legal Profession Act 2006*.

All Legal Practitioner Partners of the Multi-Disciplinary Partnership must sign this Undertaking.

|                                    |           |
|------------------------------------|-----------|
| Name of Legal Practitioner Partner | Signature |
| Name of Legal Practitioner Partner | Signature |
| Name of Legal Practitioner Partner | Signature |
| Name of Legal Practitioner Partner | Signature |
| Name of Legal Practitioner Partner | Signature |
| Name of Legal Practitioner Partner | Signature |

**Authorised person completing this form:**

I hereby certify that the information in this form is true and complete:

Legal Practitioner Partner's name:

Legal Practitioner Partner's signature:

Date:

**Send completed forms to:**

Nicole Crossley, Executive Secretary, ACT Law Society,  
 nicole.crossley@actlawsociety.asn.au  
 or GPO Box 1562, Canberra ACT 2601

**Enquiries:**

Phone 02 6274 0300.