

Notification of Establishment of a Law Practice in the ACT

Law Practice Details:
Trading Name
Registered Business Name
ABN
Phone Number
Trading Address
Postal Address (if different)
Date on which the practice intends to commence providing legal services

Structure and Trust Account:
<p>Tick the business structure that you will be operating:</p> <p><input type="checkbox"/> Sole practitioner</p> <p><input type="checkbox"/> Incorporated Legal Practice (you must also complete an ILP notification form)</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Multi-Disciplinary Partnership (you must also complete an MDP notification form)</p>
<p>Will you be operating a trust account?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><small>If yes, you must also complete the following forms: "Notification of Opening a General Trust Account", which can be found on the Society's website at www.actlawsociety.asn.au/practising-law/guidelines/all-practice-forms</small></p>

Authorised person completing this form:
Name
Position Held
Email
Signature
Date

Send completed forms to:

Member Connect, ACT Law Society
by email to memberconnect@actlawsociety.asn.au