

Form 6

Application for investigation to be reopened r, 10

Schedule 2, clause 4 Employment Relations Act 2000

Between

Full name of Applicant

Address

Telephone

Email

And

Full name of Respondent

Address

Telephone

Email

To the **Employment Relations Authority** and To the **Applicant**

Application for investigation to be reopened

1 I apply to the Employment Relations Authority *at (*select one) for the reopening of the investigation to which the Authority's *determination/order (*select one) of _____ relates.

Auckland

Determination

insert date above

Christchurch

Order

Wellington

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2 The file number of the Authority's *determination/order (*select one) is:

Determination

Order

insert number above

3 A copy of the Authority's *determination/order (*select one) is attached to this application.

Determination

Order

Grounds

4 This application is made on the following grounds:
State details fully but concisely

Prescribed fee

5 This application is accompanied by the prescribed fee

Address for service

6 This application is lodged by me the applicant On behalf of the applicant

full name of lodging party

On behalf of: (full name of applicant/respondent)

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The applicant's/respondent's (*select one) address for service is:
A full address, phone number and email address must always be supplied

*Applicant

*Respondent

Address

Telephone

Email

Date

Applicant/Respondent

Signature

Notice to
respondent

- 1 If you intend to respond to this application, you must, within 14 days after the date of the service of this application on you, lodge a statement in reply with an officer of the Employment Relations Authority.
- 2 The term **days** does not include any day in the period beginning with 25 December in any year and ending with 5 January in the following year.
- 3 You will be notified of the place, date, and time at which the Authority will conduct any investigation meeting in respect of this application.

Date

Signature

(Officer of the Employment Relations Authority)