r 26J

Statement in reply to application to fix disputed terms in collective contract
*Section 73, Screen Industry Workers Act 2022*

Between

Full name of applicant: …………………………………………………………………………………

Postal address: …………………………………………………………………………………………...

Phone number: …………………………………………………………………………………………..

Email address: …………………………………………………………………………………………...

There is space at the back of this form to add details of further parties on the applicant’s side of bargaining.

And

Full name of respondent: ………………………………………………………………………………

Postal address: …………………………………………………………………………………………...

Phone number: …………………………………………………………………………………………..

Email address: …………………………………………………………………………………………...

There is space at the back of this form to add details of further parties on the respondent’s side of bargaining.

**To** the applicant

and

**To** the Employment Relations Authority

**Details about bargaining**

1 This statement in reply relates to a draft: enterprise contract / occupational contract.\*

 \*Select one.

 If you answered “occupational contract” above, please provide the Employment Relations Authority file number for this bargaining (if known):

…………………………………………………………………………………………………...

2 The parties to this bargaining are:

 Engager side: ……………………………………………………………………………………

 Worker side: …………………………………………………………………………………….

3 This statement in reply is made on behalf of the engager / worker\* parties to bargaining.

 \*Select one.

**Statement as to state of negotiations and final offer proposed**

4 The respondent’s view in relation to the term(s) in dispute identified in the application is [*state topic of term(s) in dispute fully, fairly, and clearly*]:

 …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

5 The respondent’s position on the term(s) in dispute is [*state details fully, fairly, and clearly*]:\*

 …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

 \*When responding to this question, please refer to the criteria the Authority will use when fixing terms in [Schedule 4, clause 6 of the Screen Industry Workers Act 2022](https://legislation.govt.nz/act/public/2022/0052/latest/LMS300938.html).

6 The respondent’s final offer as to the term(s) in dispute is [*state specifically the term(s) you propose be included in the collective contract*]:

 …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

7 I attach a copy of the draft collective contract and the following documents that I think are relevant:\*

 …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

\*List all the documents that you wish to rely on or refer to in making this application.

**Arbitrating body**

8 Do you wish to nominate individuals to be part of the arbitrating body that fixes terms for this collective contract? Yes / No\*

 \*Select one.

 If the answer to this question is “Yes”, please provide the names and contact information of either one or two individuals:

 ……………………………………………………………………………………………………………………………………………………………………………………………………

**Mediation**

9 Have the parties tried to resolve this problem or matter by using mediation services provided by the Ministry of Business, Innovation, and Employment? Yes / No\*

\*Select one.

10 Have the parties tried to resolve this problem or matter by using mediation services provided by someone other than the Ministry of Business, Innovation, and Employment? Yes / No\*

\*Select one.

11 If you, the respondent, have answered “No” to both the question in paragraph 9 and the question in paragraph 10, please indicate why you have not used mediation services to try to resolve the problem or matter [*state details fully but concisely*]:

 ……………………………………………………………………………………………………………………………………………………………………………………………………

**Facilitated bargaining**

12 Have the parties tried to resolve this problem or matter by using facilitated bargaining provided by the Employment Relations Authority? Yes / No\*

\*Select one.

13 If you, the respondent, have answered “No” to the question in paragraph 12, please indicate why you have not used facilitated bargaining to try to resolve the problem or matter [*state details fully but concisely*]:

 ……………………………………………………………………………………………………………………………………………………………………………………………………

14 Have you, the respondent, taken any other steps of any kind to resolve the problem or matter?

 Yes / No\*

\*Select one.

If the answer to this question is “Yes”, please specify the other steps taken [*state details fully but concisely*]:

 ……………………………………………………………………………………………………………………………………………………………………………………………………

**Address for service**

15 This application is lodged by [full name of respondent] / [name of representative]\* ………………………………………………. on behalf of [full name of respondent] ……………………………………………….

 \*Select one.

16 The respondent’s address for service is ……………………………………………………….. ………………...………………………………………………………………………………… telephone number is ………………………………………………., and email address for service is ………………………………………………..

 \*A full address, a telephone number, and an email address must always be supplied.

Date: ……………………………………………….

Signature: ………………………………………….

(Respondent)

**Required documents**

You must provide the following documents along with your statement in reply:

[ ]  A copy of the draft collective contract.

[ ]  Other documents that are relevant to the dispute and listed in paragraph 7 (if any).

**Appendix: Extra spaces for bargaining parties’ details**

All organisations named here must also be listed in paragraph 2.

Name of bargaining party: ………………………………………………………………………………

Bargaining side: Applicant / Respondent\*

\*Select one.

Postal address: …………………………………………………………………………………………...

Phone number: …………………………………………………………………………………………..

Email address: …………………………………………………………………………………………...

Name of bargaining party: ………………………………………………………………………………

Bargaining side: Applicant / Respondent\*

\*Select one.

Postal address: …………………………………………………………………………………………...

Phone number: …………………………………………………………………………………………..

Email address: …………………………………………………………………………………………...

Name of bargaining party: ………………………………………………………………………………

Bargaining side: Applicant / Respondent\*

\*Select one.

Postal address: …………………………………………………………………………………………...

Phone number: …………………………………………………………………………………………..

Email address: …………………………………………………………………………………………...

Name of bargaining party: ………………………………………………………………………………

Bargaining side: Applicant / Respondent\*

\*Select one.

Postal address: …………………………………………………………………………………………...

Phone number: …………………………………………………………………………………………..

Email address: …………………………………………………………………………………………...