



## APPLICATION TO NOMINATE AN ADJUDICATOR

UNDER SECTION 33 AND SECTION 63 OF THE CONSTRUCTIONS CONTRACTS ACT 2002

The claimant applies to the Arbitrators' and Mediators' Institute of New Zealand Inc. for the nomination of an adjudicator for the purposes of a construction contract under the Construction Contracts Act 2002.

### 1. Claimant's Details

Name of Claimant:	
Contact Person:	
Address for Service:	
Phone:	Fax:
Email:	Mobile:

### 2. Respondent's Details

Name of Respondent:	
Contact Person/Respondent's Representative:	
Address for Service:	
Phone:	Fax:
Email:	Mobile:

### 3. Other Parties' (If Any) Details

Name of Respondent/Owner:	
Contact Person/Representative:	
Address for Service:	
Phone:	Fax:
Email:	Mobile:

Name of Respondent/Owner:	
Contact Person/Representative:	
Address for Service:	
Phone:	Fax:
Email:	Mobile:

Name of Respondent/Owner:	
Contact Person/Representative:	
Address for Service:	
Phone:	Fax:
Email:	Mobile:

**4. Date that the Notice of Adjudication was served on the other party/parties to the construction contract.** The notice must be served within 5 business days of AMINZ receiving this application.

Notice Served:

Date:     /     /
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\*Please attach a copy of the Notice of Adjudication

**5. Has the claimant served on the respondent any other notice of adjudication relating to the same contract?**

Delete One	Yes/No
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If yes, please attach copies.

PLEASE NOTE: THIS APPLICATION MUST BE ACCOMPANIED BY A COPY OF THE NOTICE OF ADJUDICATION

The requirement for a Notice of Adjudication under the Construction Contracts Act 2002 is as follows:

S.28(2)        The Notice of Adjudication must state:

- (a) the date of the notice;
- (b) the nature and brief description of the dispute and of the parties involved;
- (c) details of where and when the dispute arose
- (d) the relief and the remedy that is sought
- (e) whether approval for the issue of a charging order under section 29 is being sought;
- (f) whether a determination of an owner's liability under section 30(a) and an approval for the issue of a charging order under section 30(b) are being sought;
- (g) details sufficient to identify the construction contract to which the dispute relates, including –
  - (i) the names and addresses of the parties to the contract; and
  - (ii) if available, the addresses that the parties have specified for the service of the notices.

**6. Does the claimant seek the Adjudicator's approval for the issue of a charging order?**

Delete One	Yes/No
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**7. Is the nature of the dispute based on payment?**

Delete One	Yes/No
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Other (please specify):

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<p><b>8. Type of Contract</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> NSZ3910 of 3915</li><li><input type="checkbox"/> NZ Institute of Architects (NZIA) Standard Conditions</li><li><input type="checkbox"/> Registered Master Builders Federation</li><li><input type="checkbox"/> Certified Builders Association of NZ</li><li><input type="checkbox"/> Other (please specify)</li></ul> <hr/> <hr/> <hr/> <hr/>	<p><b>9. The Dispute Arises out of:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Main Contract</li><li><input type="checkbox"/> Management Contract</li><li><input type="checkbox"/> Design Build Contract</li><li><input type="checkbox"/> Sub Contract</li><li><input type="checkbox"/> Sub Sub Contract</li><li><input type="checkbox"/> Residential Contract</li><li><input type="checkbox"/> Other (please specify)</li></ul> <hr/> <hr/> <hr/>
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**10. Other Relevant Details:**

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**11. Claimant's Signature**

Claimant's Full Name: \_\_\_\_\_

Claimant's Signature: \_\_\_\_\_

**12. Payment**

The application fee of \$500.00 (GST Incl) must be paid to the Arbitrators' and Mediators' Institute of New Zealand Inc. (AMINZ) **before** the application can be processed and a nomination made.

Payment can be made by any of the following methods: (Please tick one)

**Cheque:** please make cheques payable to Arbitrators' and Mediators' Institute of NZ Inc and return with this completed form to AMINZ, PO Box 1477, Wellington 6140.

**Direct Credit:** Account No. 02 0568 0419074 00. Please use the following reference: ADJ (name)

**Credit Card:**

Please charge my credit card    **Visa**     **Mastercard**

Name on card: \_\_\_\_\_

Card No:                Expiry Date: \_\_\_ / \_\_\_

Card Verification Number: \_\_\_\_\_

Amount:    \$    500.00

Signature \_\_\_\_\_

**Arbitrators' and Mediators' Institute of New Zealand Inc**  
Level 3, Hallenstein House, 276-278 Lambton Quay, P O Box 1477, Wellington 6140  
Tel 0800 426 469 | Fax 04 499 9387 | email [institute@aminz.org.nz](mailto:institute@aminz.org.nz)

**FAX BACK TO AMINZ ON FAX: (04) 4999 387**