FORMS 1 RULE 4(3)

FORM OF ORIGINATING APPLICATION in respect of allegations against a Legal Practitioner. Number:.... IN THE MATTER OF THE LEGAL PRACTITIONERS ACT 2004 **Applicant** AND **}** Respondent Apply (on behalf of) That of be required to answer to the allegations contained in the Statement/Affidavit which accompanies this Application and that such Order be made as the Committee shall think right. SIGNED by the Applicant Name of Applicant Phone No. of Applicant Whose address for service is:

Notes:

- 1. Applicant making an application on behalf of a third party to state the name of the third party.
- 2. Add the full names of the Respondent and his address or last known abode or last known place or places of business.

FORMS 2 RULE 4(4)

FORM OF NOTICE to accompany Statement of Evidence

FORM OF ORIGINATING APPL Practitioner	ICATION in respect of	
		Number:
IN THE MATTER OF THE LEGAL PRACTITIONERS ACT 2004		
	}	Applicant
AND	_	
	}	Respondent
TAKE NOTICE that the Applicant/Respondent proposes to rely upon the Statement(s)/Affidavit of Facts and accompanying documents on oath listed below, copies of which are served herewith.		
as a witness you must, not less that application, notify me and the Secretar	n 9 days before the orry to the Committee to	nts to be required to attend the hearing date set down for the hearing of the that effect. In the event of your failure in question in evidence without more.
LIST		
Date of Statement	Name of Person who the Statement/Affida	
1.		
2.		
3.		
Date:		
Signed:		
Address:		