r 26I

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 Employment Relations Authority

and

**To** the respondent

**Details about bargaining**

1 This application 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 application 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 term(s) in dispute is [*state topic of term(s) in dispute fully, fairly, and clearly*]:

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

5 The applicant’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 applicant’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.

If the answer to this question is “Yes”, please provide the date or dates of the mediation:

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

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 applicant, 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.

If the answer to this question is “Yes”, please provide the date or dates of the facilitated bargaining:

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

13 If you, the applicant, 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 applicant, 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*]:

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

**Prescribed fee**

15 This application is accompanied by the prescribed fee.

**Address for service**

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

\*Select one.

17 The applicant’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: ………………………………………….

(Applicant)

**Required documents**

You must provide the following documents along with your application:

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: …………………………………………………………………………………………...

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)