

LAW PRACTICE CERTIFICATE

Pursuant to Part 4 Division 2A of the *Motor Accident Insurance Act 1994* (MAI Act); Part 1 Division 1AA of the *Personal Injuries Proceedings Act 2002* (PIP Act); Chapter 6B Parts 1 and 2 of the *Workers' Compensation and Rehabilitation Act 2003* (WCR Act); For further information on the provision of this form visit www.worksafe.qld.gov.au; www.maic.qld.gov.au; www.lsc.qld.gov.au. Statutory Declaration made pursuant to the sections 13C, 13E, 14 Oaths Act 1867.

I, _____ of _____, do solemnly and sincerely declare that:
in the State or Territory of _____, do solemnly and sincerely declare that:

- I am an Australian legal practitioner, as defined in section 6(1) of the *Legal Profession Act 2007*, and:
I am the supervising principal of _____ ("the law practice"); **OR**
I am authorised under section 36C of MAI Act, and/or section 8D of PIP Act and/or section 325N of the WCR Act to sign this certificate on behalf of _____ ("the law practice").
- The law practice acts for _____ ("the claimant") in respect of a statutory workers' compensation claim and/or a claim for damages for injury which occurred:
on ____/____/____ ("the claim"); **OR**
DD/MM/YY
a period of time from ____/____/____ to ____/____/____ ("the claim").
DD/MM/YY DD/MM/YY
- I have full knowledge of the matters the subject of this declaration which relates to conduct engaged in on, or after 5 December 2019 (MAI Act) or 30 June 2022 (PIP Act and WCR Act).
- The supervising principal and each associate of the law practice have not given or received, agreed to give or receive, or allowed or caused someone else to give or receive consideration to another person for the referral or potential referral of this claim in contravention of section 74 MAI Act, section 71 PIP Act and/or section 325R WCR Act. If any of these sections **do not apply**, provide the reason why they do not apply:
- The principal and each associate of the law practice have not personally approached or contacted the claimant and solicited or induced the claimant to make this claim in contravention of section 75 MAI Act, section 71B PIP Act and/or and/or section 325TWCR Act. If any of these sections do not apply, provide the reason why they do not apply:
- If this claim is a speculative personal injury claim, the costs agreement related to this claim complies with section 79 of MAI Act, section 71E of the PIP Act, and/or section 347 of the *Legal Profession Act 2007*.
And I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.

The contents of this form are true, except where they are stated on the basis of information and belief, in which case they are true to the best of my knowledge. I understand that a person who makes a declaration that the person knows is false in a material particular commits an offence.

HARD COPY DOCUMENT

Complete this page and signature block ONLY if signing a hard copy of this form and in the physical presence of a witness

± The signatory is responsible for ensuring this form is completed and provided to each recipient as required under the applicable legislation. For claims that fall under multiple schemes, this form should be provided to each relevant body in accordance with the relevant Act.

Full name and signature of person making the declaration.

If using a substitute signatory, only insert the surname and given name of the declarant, leave all remaining fields blank, and complete the next section.

DECLARED by

Surname/family name of declarant

Given name/s of declarant

Signature of declarant

AT

Place where declarant is located

ON

Date of signing (Day/Month/Year)

Full name and signature of substitute signatory.

(cross out if not applicable)

*Refer to the **Fact Sheet — Who can sign a statutory declaration or affidavit as a substitute signatory.***

Signed for and at the direction of the declarant by

Surname/family name of substitute signatory

Given name/s of substitute signatory

Signature of substitute signatory

AT

Place where substitute signatory is located

ON

Date of signing (Day/Month/Year)

Full name and signature of authorised witness.

*Refer to the **Fact Sheet — Who can witness a statutory declaration or affidavit in Queensland.***

Qualification of witness (e.g lawyer, JP, Cdec etc).

In the presence of

Surname/family name of witness

Given name/s of witness

Type of witness

Signature of witness

Witness law practice/place of employment (if applicable)

Seal of office (if applicable)

ELECTRONIC DOCUMENT

Complete this page and signature block **ONLY** if this is made in the form of an electronic document

Tick if applicable.

I state that:

This declaration is made in the form of an electronic documentⁱ

This declaration is electronically signedⁱⁱ

This declaration is made, signed and witnessed under part 6A of the *Oaths Act 1867*ⁱⁱⁱ

DECLARED by

Full name and signature of person making the declaration.

If using a substitute signatory, only insert the surname and given name of the declarant, leave all remaining fields blank, and complete the next section.

Surname/family name of declarant

Given name/s of declarant

Signature of declarant

AT

Place where declarant is located

ON

Date of signing (Day/Month/Year)

Signed for and at the direction of the declarant by

Substitute signatory to include additional information if directed over AV link. Refer to the **Fact Sheet – Who can sign a statutory declaration or affidavit as a substitute signatory.**

Surname/family name of substitute signatory

Given name/s of substitute signatory

Substitute signatory qualification (Australian legal practitioner/government legal officer/as applicable)^{iv}

Signature of substitute signatory

AT

Place where substitute signatory is located

ON

Date of signing (Day/Month/Year)

Full name and signature of authorised witness. Refer to the **Fact Sheet – Who can witness a statutory declaration or affidavit in Queensland.**

Qualification of witness (e.g lawyer, JP, Cdec, etc).

Witness must include additional information under section 13E of the *Oaths Act 1867*. Refer to the **Fact Sheet – Witness information for statutory declarations or affidavits.**

Special witness

If this form has been electronically signed or witnessed over AV link, the special witness must declare which of the following apply to the witnessing of this form.

In the presence of

Surname/family name of witness

Given name/s of witness

Type of witness

Signature of witness

Witness law practice/place of employment^v (if applicable)

Seal of office (if applicable)

For special witnesses:

I am a special witness under the *Oaths Act 1867* (see section 12 of the *Oaths Act 1867*)

This document was made in the form of an electronic document^{vi}

I electronically signed this document^{vii}

This statutory declaration was made, signed and witnessed under part 6A of the *Oaths Act 1867* – I understand the requirements for witnessing a document by AV link and have complied with those requirements^{viii}

The endnotes are to assist in the completion of the form and do not need to be witnessed or submitted with your form.

- i Tick this box if you electronically signed the document, or if you physically signed the document over AV link and then sent a scanned copy of that document to the witness.
 - ii Tick this box if you or your substitute signatory electronically signed the document using an accepted method under the *Oaths Act 1867*. Do not tick this box if you signed the document on paper.
 - iii Tick this box if the document was made over AV link.
 - iv A person may be directed by AV link to sign a document for a signatory only if the person is: an Australian legal practitioner; or a government legal officer under the *Legal Profession Act 2007* (who is an Australian lawyer but not an Australian legal practitioner and witnesses documents in the course of the government work engaged in by the officer); or is an employee of the public trustee (s 31P, *Oaths Act 1867*).
 - v Legal practitioners who witness this document as a special witness must include their law practice (s 13E *Oaths Act 1867*).
 - vi Tick this box if you electronically signed the document or if you physically signed the document and sent a scanned copy of that document to the signatory.
 - vii Tick this box if you electronically signed the document using an accepted method under the *Oaths Act 1867*. Do not tick this box if you signed the document on paper.
 - viii Tick this box if the document was made over AV link.
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