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| **SUPREME COURT OF THE NORTHERN TERRITORY**  **LITIGATION SEARCH ORDER FORM** |

Civil Registry G.P.O. Box 3946

Supreme Court Building DARWIN N.T. 0801

State Square, Mitchell Street Telephone: (08) 8999 7024

DARWIN N.T. 0800 Facsimile: (08) 8999 5446

**\* Indicates mandatory field - failure to complete will result in the form being rejected.**

***Please forward completed forms to:* dwnsupcrtreg.doj@nt.gov.au**

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| **\*Name of Firm &**  **ABN or ACN:** |  | | |
| **\*Name of Requestor:** |  | | |
| **\*Email Address:** |  | | |
| **\*Postal Address:** |  | | |
| **\*Contact Telephone:** |  | **\*Your Reference:** |  |
| **\*Date of Request:** |  | **\*Date Results Required:** |  |

The ordering firm, acting as principal in its own right, requests the SUPREME COURT OF THE NORTHERN TERRITORY to provide the following litigation search services and agrees to be bound by the conditions set out below.

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| **Searches for Civil Proceedings ONLY** | **Per Entity Searched** | **GST**  **per Entity** | **Per Result Provided** | **GST**  **per Result** |
| ***Search inc. Local Court Jurisdiction (Civil only)*** | **$31.00** | **$0.00** | **$31.00** | **$0.00** |

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| --- | --- | --- | --- |
| **Please tick to indicate what information is required to be included in search results:** | | | |
| File Number(s),  Jurisdiction & Venue  *(If Any)* | What type of Party the  Entity is in the proceedings  (E.g. Ptf or Def) *(If Any)* | Whether proceedings are  current or completed /  closed | Nature of Proceedings  (E.g. Debt, Damages) |
| **Names of Entities (&/or ABN) to be searched:** | | | |
| 1. | | 6. | |
| 2. | | 7. | |
| 3. | | 8. | |
| 4. | | 9. | |
| 5. | | 10. | |
| Please tick if attachment is annexed with names of entities to be searched | | Please indicate the number of pages attached: ­­­­\_\_\_\_\_\_\_\_\_ | |

I declare that I am authorised to act on behalf of the above firm and agree that, notwithstanding any express or implied agency agreement which the firm or I may have with any third party, the above firm accepts responsibility for the payment of all accounts within 30 days receipt of an invoice for payment from the Department of Business & Employment (DBE) on behalf of the Supreme Court of the Northern Territory. I agree to the following conditions:

1. The person signing this order asserts and warrants that (s)he has authority to do so on behalf of the ordering firm.

2. The ordering firm acknowledges that, upon acceptance of this order by **the Supreme Court of the Northern Territory**, this order is irrevocable.

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| **Name of person placing order** (please print): |  |
| **Signature of person placing order** (for and behalf of ordering firm): |  |

Received and accepted for and on behalf of the Supreme Court of the Northern Territory (Civil Registry) *(office use only)*

|  |  |  |  |  |  |
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| **Name:** |  | **Signature:** |  | **Date:** |  |