

Personal Injury Commission

## **Appointed Representative Application** form

## **Motor Accidents Division**

Use this form if you are making an application to be an appointed representative for a person under a legal incapacity.

- Any attachments will form part of this form
- If you need advice about this form please contact the Personal Injury Commission (Motor Accidents Division) on 1800 PIC NSW (1800 742 679) or email <u>help@pi.nsw.gov.au</u>
- You will be asked on the final page to confirm if the details submitted in the application are true and correct. Making a false or misleading claim or statement is punishable by law and could result in prosecution.

### Lodgement of application

Please submit your application to: Personal Injury Commission, Motor Accidents Division Level 19, 1 Oxford Street Darlinghurst NSW 2010 or email: <u>help@pi.nsw.gov.au</u>

# Application to be an appointed representative of a person under legal incapacity

Please complete this section if you are seeking to be appointed as a representative of a party to these proceedings who is under legal incapacity.

A claimant who is a person under legal incapacity may not make any application or refer any matter to the Motor Accident Division of the Personal Injury Commission, or carry on proceedings, except by his or her appointed representative in accordance with section 7.47(1) of the *Motor Accident Injuries Act* 2017 and clause 7.31 of the Motor Accident Guidelines.

**Please indicate the legal incapacity of the claimant and provide evidence in support** (eg Birth certificate, Guardianship Order or Financial Management Order):

- o child under the age of 18 years
- o an involuntary patient or forensic patient within the meaning of the *Mental Health Act 2007*
- o a person under guardianship within the meaning of the *Guardianship Act* 1987
- o a protected person within the meaning of the NSW *Trustee and Guardian Act 2009*
- an incommunicative person, being a person who has such a physical or mental disability that he or she is unable to

receive communications, or express his or her will, with respect to his or her property or affairs

#### Does the claimant already have an appointed representative?

If you already have been appointed as a representative, an application for appointment does not need to be made however we will require details of the terms of the existing appointment.

- Yes (please provide a copy of the terms of the existing appointment)
- $\circ$  No, please complete the following:

Name of the person seeking appointment

Postal address or DX address (NSW DX only)

Phone number

Relationship to the claimant

Email

### **Consent to appointment**

 I,
 consent to being appointed as the representative of

 and declare that I do not have any interest in the proceedings

 adverse to the interests of the person under legal incapacity.

adverse to the interests of the person under legal incapacity. Signature:

Date (DD/MM/YYYY)