

Form 42 Version 1	<p style="text-align: center;">Application for certificate of cessation of requirement under section 171(4) <i>Industrial Relations Act 2016, Section 242(2)</i> <i>(Form for an employer who requires a certificate under section 242(2) of the Act in circumstances where after a request has been made by relevant employees under section 171(4) the circumstances have changed under section 171(5) of the Act.</i></p>	R.171
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**INDUSTRIAL REGISTRAR**

*Industrial Relations Act 2016 s 242(2)*

*(name of applicant employer)*

AND

*(name of respondent employee organisation)*

(Matter No.        /20        /        )

**APPLICATION FOR CERTIFICATE OF CESSATION OF REQUIREMENT  
IN SECTION 171(4)**

TO:    The Industrial Registrar, Industrial Registry, Level 21, Central Plaza 2, 66 Eagle Street, (Corner  
Creek and Elizabeth Streets), Brisbane 4000, GPO Box 373, Brisbane Q 4001  
Phone: (07) 3227 8060    Fax: (07) 3221 6074

**TAKE NOTICE** that I,

*(full name of employer or officer or employee of employer), (if appropriate, position or title  
of officer or employee of employer),*

[of]

*(address)*

apply for:

1. A certificate under section 242(2) of the *Industrial Relations Act 2016*, stating that

of

*(full name of employer)*

*(address)*

need not negotiate with the

*(full name of employee organisation)*

of

*(address)*

about a proposed certified agreement,

titled

*(name or title of proposed agreement)*

– Certified Agreement,

because of the circumstance[s] under section 171(5) of the *Industrial Relations Act 2016*, that after  
the request under section 171(4) of the Act was made:

(a) [the relevant employee withdrew the request]; [and][or]

(b) [the employee stopped being a relevant employee].

And I further state that:

2. The facts and circumstances supporting my claim in [1.(a)] [and] [1.(b)] are set out in the affidavit  
accompanying this application which affidavit also complies with the requirements of R.171(4).

Signed:

*(signature of employer, officer or employee of employer)*

*(print name)*

Description:

*(position or title of officer or employee of employer)*

Dated:

*(day, month, year)*

PARTICULARS OF THE APPLICANT

Name:

Business address:

**Applicant's address for service:**

Applicant's phone number or contact phone number:

Applicant's fax number: *(if any)*

Applicant's e-mail address: *(if any)*

[IF APPLICANT HAS A LAWYER

Applicant's lawyer's name:

and firm name:

Lawyer's business address:

**Address for service:**

Phone:

Fax:

E-mail address: *(if any)*]

[IF APPLICANT HAS AN AGENT *(An appointment of agent form must accompany this application, R 13(1)(l))*

Applicant's agent's name:

and corporation or business name:

Agent's business address:

**Address for service:**

Phone:

Fax:

E-mail address: *(if any)*]

[PARTICULARS OF THE RESPONDENT

Name:

Position or title: *(if appropriate)*

Organisation, Association:

Residential or business address:

**Respondent's address for service:**

Respondent's phone or contact phone number:

Respondent's fax number: *(if any)*

Respondent's e-mail address: *(if any)*]

[IF RESPONDENT HAS A LAWYER

Respondent's lawyer's name:

and firm name:

Lawyer's business address:

**Address for service:**

Phone:

Fax:

E-mail address: *(if any)*]

[IF RESPONDENT HAS AN AGENT

Respondent's agent's name:

and corporation or business name:

Agent's business address:

**Address for service:**

Phone:

Fax:

E-mail address: *(if any)*]

End note: This application must be filed and served on the respondent employee organisation(s).