

QIRC Matter No:	/		/
Industrial Magistrates Court Matter No:		/	
Industrial Magistrates Court Location:			

## Form 68 – Application for a claim before an Industrial Magistrate

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Industrial Relations Act 2016, sections 379, 386, 396, 402 and 506
Industrial Relations (Tribunals) Rules 2011, rules 101 and 102, Part 3B

## Information

**Applicant/Claimant:** 

- Use this form to make a claim in the Industrial Magistrates Court. It is to be filed in a Magistrates Court.
- An Unpaid Amount Claim *may* be referred to the Queensland Industrial Relations Commission for a conciliation conference, in accordance with s 547C(2) of the *Industrial Relations Act 2016*. If the Unpaid Amount Claim is not resolved in the conciliation process, it will be referred to the relevant Industrial Magistrates Court for hearing before an Industrial Magistrate.
- Please read this form carefully. Please complete all relevant sections. Information that is missing or non-compliant with the relevant section of an Act or Rules may result in the non-acceptance of your form.
- For further information please visit the website at <a href="mailto:qirc.qld.gov.au">qirc.qld.gov.au</a>

Dosnandant/Dafandant			V				
Respondent/Defendant:							
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PLEASE NOTE: If there are more	tnan two parties to	o this applica	ation, piease co	impiete a <b>Foi</b>	m 1 – Parties iis	<b>t</b> and file with tr	is form.
Application							
This application is made pursua	nt to the following	section/s of	the <i>Industrial I</i>	Relations Act .	2016:		
s 379	s 386		s 396		s 402		s 506
The Applicant/Claimant applies	to the Industrial	Magistrate f	or an order di	recting the R	espondent/Defe	ndant to pay th	e amount
claimed, the particulars of whic	h are contained in	this applicati	on, to:				
Name of person to whom paym	ent is to be made:						
1. Applicant/Claimant's de	etails						
Title [please select]	Mr	Mrs	Ms	Miss	Mx	Other:	
Name of Applicant/							
Claimant:							
Organisations							
Organisation:							
Name of contact person:							
Postal/Service address:							
	Suburb/Town					Postcode	2
Phone number:			Mobi	le number:			
Email address:							
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2. Claimant's details (if Claimant is not the Applicant)						
Title [please select]	Mr	Mrs	Ms	Miss	Mx	Other:
Name of Claimant:						
Postal/Service address:						
	Suburb/Town					Postcode
Phone number:	Suburby Fown		Mobi	le number:		rosteode
Email address:						
3. Respondent/Defendan	t's details					
Title [please select]	Mr	Mrs	Ms	Miss	Mx	Other:
Name of Respondent/ Defendant:						
Determinant.						
Name of contact person:						
Postal/Service address:						
	Suburb/Town					Postcode
Phone number:			Mobi	le number:		
Email address:						
	_					
4. Signature of Applicant	'Claimant					
Signature:						
Name:						
Date:						
If the application is being made	pursuant to s 402	or s 506 <i>only</i> of	the <i>Industrial R</i>	elations Act 201	6, the applicati	on must be signed by a
Justice of the Peace below.  Before me (witness name):						
At (location):						
Signature:						
· ·						
	Justice of the Pea	ce				
Date:						
5. Subject matter of the claim						
riease attach a schedule if	Please attach a schedule if more room required - particulars of amounts payable to be included in Schedule 1					

## Schedule 1 - Particulars of amounts payable

Schedule 1 must state details of the amounts payable in itemised form showing the dates the amounts claimed became payable, how each calculation was made, and the total amount claimed.

Leave section blank if not applie	cable						
1.1 Wages payable							
Date payable from:		Date payable to:					
Wages and allowances:			\$				
Overtime:			\$				
Other e.g. unauthorised deduc	ctions:		\$				
Total:			\$				
Less amount paid:			\$				
Amount unpaid:			\$				
1.2 Annual leave payable							
Annual leave							
Date payable from:		Date payable to:					
Number of weeks:		Weekly rate:	\$				
Plus 17.5% loading (if applicab	<u>ا</u> اهار	Weekly late.	\$				
Total annual leave:	10)		\$				
Pro rata annual leave			<del>'</del>				
Date payable from:		Date payable to:					
Total ordinary earnings (to mu	ıltiply by 1/12):		\$				
Plus 17.5% loading (if applicab			\$				
Total pro rata annual leave:			\$				
Totals							
Total annual leave + total pro	Total annual leave + total pro rata annual leave: \$						
Less amount paid:			\$				
Amount unpaid:			\$				
1.2 Long Comico Logyo							
1.3 Long Service Leave							
Date payable from:		Date payable to:					
Number of hours/days/weeks:		Rate per Hour Week:	\$				
Total long service leave:			\$				
Less amount paid:			\$				
Amount unpaid:			\$				
1.4 Unpaid tool allowance	for an apprentice						
Date payable from:	тог ин ирргениес	Date payable to:					
Total tool allowance:		. ,	\$				
Less amount paid:	\$						
Amount unpaid:	\$						
			T				
1.5 Unpaid remuneration/	unauthorised deductions for	an apprentice/trainee					
Date payable from:		Date payable to:					
Total remuneration:	\$						
Unauthorised deduction:	\$						
Less amount paid:							
Amount unpaid:	\$						

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1.6 Unpaid superannuation contributions					
Date payable from:		Date payable to:			
Approved superannuation fund:					
Total superannuation contributions:			\$		
Less amount paid:	\$				
Amount unpaid:	\$				

1.7 Wages payable in lieu of notice					
Number of weeks' notice requi	red:		Number of weeks' notice giv	ren:	
Number of weeks payable in lie	eu of notice:		Date of termination:		
Weekly rate of pay:	Weekly rate of pay:				
Date of birth:					
Date employed from: Date employed to:					
Length of employment:					
Total:				\$	
Less amount paid:				\$	
Amount unpaid:				\$	

1.8 Severance allowance payable		
Number of weeks' severance allowance payable:		
Number of years continuous service:		
Weekly rate of pay:	\$	
Total:	\$	
Less amount paid:	\$	
Amount unpaid:	\$	

1.9 Summary of amount payable			
1.1 Total unpaid wages:	\$		
1.2 Total unpaid annual leave:	\$		
1.3 Total unpaid long service leave:	\$		
1.4 Total unpaid tool allowance (for an apprentice):	\$		
1.5 Total unpaid remuneration (for an apprentice/trainee):	\$		
1.6 Total unpaid superannuation contributions:	\$		
1.7 Total unpaid wages in lieu of notice:	\$		
1.8 Total unpaid severance allowance:	\$		
Total amount unpaid:	\$		

1.9 Details of claim for damages suffered by an employee because of the employer failing to pay the employee's wage
(See s 506(1)(b)(iii) of the Industrial Relations Act 2016).
Details of claim - Please attach a schedule if more room required
<b>1.10</b> Details of claim for damages for contravention of an agreement made under an industrial instrument (See s 506(1)(b)(v) of the <i>Industrial Relations Act 2016</i> ).
Name of Industrial Instrument:
Details of claim - Please attach a schedule if more room required

## Schedule 2 - Particulars of claim for repayment of a fee received by a private employment agent (See s 402 of the *Industrial Relations Act 2016*).

2.1	Decla	ration (Select and complete all that apply)				
1. I declare that no other application in accordance with s 403 of the <i>Industrial Relations Act</i> 2016 has been made by or on behalf of the Claimant.						
2.	Is the	e Claimant a model or performer?		Yes	go to qu	No estion 3)
	(a)	Did the private employment agent directly or indirectly demand or receive a finder's fee?		Yes		No
	(b)	Did the agent give the Claimant a written notice stating the particulars prescribed by regulation 12 of the <i>Industrial Relations Regulation 2018</i> ?		Yes		No
	(c)	Was the fee payable more than the percentage prescribed by regulation 13 of the <i>Industrial Relations Regulation 2018</i> of the gross amount payable to the Claimant for the work, excluding any allowances or payments prescribed by regulation 14 of the <i>Industrial Relations Regulation 2018</i> ?		Yes		No
3.		the private employment agent directly or indirectly demand or receive der's fee?		Yes		No
4.		amount payable to the Claimant/Applicant is at least the amount payab e of award or agreement:	le under	the:		
5. The total amount claimed is: (Outline the particulars of the amount claimed in 2.2)  \$\$\$						
		ulars of the amount claimed				
Pied	ise att	ach a schedule if more room required				

2.3 Summons [for the purpose of	f a claim for <i>repayment of a fee received by a private employment</i> agent only]					
То:						
Address:						
Whereas the above application for a claim has been made before me:						
	lis Majesty's name, to appear before an Industrial Magistrate to answer the said further dealt with according to law.					
Industrial Magistrates Court at:						
Place:						
Date:						
Time:						
Given under my hand at:						
Place:						
Signature:						
Name:						
Date:						