



Strata and community schemes application

CONSUMER AND COMMERCIAL DIVISION

Complete this form to apply for orders under the *Strata Schemes Management Act 2015* or *Community Land Management Act 2021*. Visit the NCAT website for information on how to complete this application form. You can also apply online using [NCAT Online Services](#).

File Number
Office use only

1. DISPUTE DETAILS

A. PLACE OF DISPUTE

What is the address of the strata or community scheme? *Include suburb and postcode*

B. SCHEME DETAILS

What type of scheme is this application is about?

Strata Scheme Strata Plan (SP) number:

Community Scheme Community Plan (DP) number:

C. OWNERS CORPORATION OR ASSOCIATION ADDRESS

The service address for the owners corporation or community/precinct/neighbourhood association can be found on the common property certificate of title.

Service Address:

The owners corporation or association must serve a copy of the application on each lot owner that is not a party unless the application is for an order imposing a monetary penalty (section 228 of the SSM Act and section 189 of the CLM Act).

D. WHAT IS YOUR DISPUTE ABOUT?

Tick the box that best describes what your strata and community schemes application is about (*select one only*).

General orders for the settlement of a dispute

Property

Managing agents/building managers or managing statement

Penalty for breach of by laws

Meetings of owners corporation or association

Penalty for breach of Tribunal orders

Records

E. HAVE YOU TRIED TO SETTLE THIS DISPUTE THROUGH MEDIATION?

Most strata and community schemes applications cannot be accepted without mediation. For mediation requirements check the [Strata schemes fact sheet](#) or [Community schemes fact sheet](#). For more information contact NSW Fair Trading.

Yes Attach evidence of attempted mediation

No What exemption are you relying on?

2. APPLICANT

A. APPLICANT TYPE

Tick the box that best describes the person or corporation making the application.

Lot owner Owners corporation Association Other (please specify)

B. APPLICANT CONTACT DETAILS

For multiple applicants attach details on a separate sheet.

First name:

Last name:

Organisation name (if applicable):

ACN/ABN:

Address:

Telephone:

Email:

If you provide an email address, NCAT will use your email as the address for service.

C. ARE YOU ABORIGINAL OR TORRES STRAIT ISLANDER?

No Prefer not to answer
 Yes - Aboriginal Yes - Torres Strait Islander Yes - both Aboriginal and Torres Strait Islander

D. APPLICANT REPRESENTATIVE DETAILS

If the applicant is represented the representative's contact details will be used as the applicant's address for service. Attach the authority to act for the applicant.

Legal Practitioner Agent Other (*please specify*)

First name:

Last name:

Organisation name (if applicable):

ACN/ABN:

Address:

Telephone:

Email:

If you provide an email address, NCAT will use your email as the address for service

3. RESPONDENT

A. RESPONDENT TYPE

Tick the box that best describes the person or corporation you are making the applicant against.

Lot owner Owners corporation Association
 Other (please specify)

B. RESPONDENT CONTACT DETAILS

For multiple respondents attach details on a separate sheet. You must provide the correct name and address for service for each respondent.

First name:

Last name:

Organisation name (if applicable):

ACN/ABN:

Address:

Telephone:

Email:

4. ORDERS AND REASONS

A. WHAT ORDERS DO YOU WANT?

Write down the section number/s of the *Strata Schemes Management Act 2015* or *Community Land Management Act 2021*, and the orders you want NCAT to make. For more information refer to the [Strata schemes fact sheet](#) or [Community schemes fact sheet](#).

B. WHY ARE YOU APPLYING TO NCAT?

Explain why you are asking NCAT to make the above orders. This will help NCAT and the respondent understand why you have made this application.

5. INTERIM ORDER DETAILS

A. IF YOU ARE YOU ASKING NCAT TO MAKE INTERIM ORDERS, SPECIFY WHAT ORDERS YOU ARE SEEKING

Note: A higher filing fee applies for an application that also asks for interim orders to be made.

B. REASONS FOR ASKING FOR THE INTERIM ORDERS

Describe the urgent considerations that justify the making of the interim orders. Give details of when and what is happening or going to happen if the interim order is not made.

6. LANGUAGE AND DISABILITY SUPPORT

A. INTERPRETER

Do you need an interpreter for the hearing? No Yes (*specify language*):

B. SUPPORT REQUIREMENTS

Indicate whether you have a disability-related need or other request for support at the hearing.

7. SIGNATURE

Applicant's signature or signature of representative.

Name

Signature

Date

Lodge your application and pay the fee with NCAT Online Services or at your nearest NCAT Registry

For NCAT Consumer and Commercial Division Registry locations visit the [NCAT website](#). For all NCAT enquiries telephone 1300 006 228 or visit www.ncat.nsw.gov.au.