

GENERAL FORM OF APPLICATION

Te Ture Whenua Māori Act 1993

Section(s).....

(State number of section(s) under which application is made)

For more information visit www.maorilandcourt.govt.nz

WHAT IS THIS FORM FOR?

Applications that do not have a prescribed form in the rules must be completed using this form. This form is designed to be generic and allow for different types of application under Te Ture Whenua Māori Act 1993.

HOW TO FILE AND COMPLETE THIS APPLICATION FORM

- (i) This form must be accompanied with the appropriate application fee (if any) and may be filed at any office of the Court (with the exception of an application seeking leave to appeal out of time which must be lodged in the Office of the Chief Registrar);
- (ii) As this is a general application form, please ensure that all information required on the form is completed;
- (iii) If the order sought is against one or more other parties you must supply the names and contact details of those parties;
- (iv) Where tick boxes ☒ are provided please ensure you tick all those boxes that apply to your application, unless you are required to select one box, then only select the box that applies;
- (v) If there is insufficient room on the form to provide all the required information you should continue your application on a separate sheet of paper; and
- (vi) Additional information – in addition to completing this form, if the application requires you to provide further information you must include all documents, information or evidence you wish the Court to consider.

Office use:

Application: ACCEPTED / REFUSED

Dated:

Signed:

Name:

Designation:

The Māori Land Court of New Zealand

(Please select the name of the Māori Land Court District in which some or all of the lands or the subject matter of the application is located)

Please select one District	☐ Taitokerau	☐ Waikato-Maniapoto	☐ Waiariki
☐ Tairāwhiti	☐ Tākitimu	☐ Aotea	☐ Te Waipounamu

SUBJECT OF APPLICATION - BLOCK / DECEASED / OTHER MATTER:

(Please state name and block number of land, Māori incorporation, person or other matter in respect of which the application is made)

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APPLICATION:

I / We(state full name)

apply for an order (Set out nature of order sought so as to clearly inform the Court what is required and if the application is not under Te Ture Whenua Māori Act give details as to the Act and section that apply)

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REASONS FOR APPLICATION:

(State grounds or reasons and any facts relied upon so as to fully inform the Court as the true nature of the application)

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AFFECTED PARTIES:

Are there any parties who will be affected by this application? (affected parties include any owners, beneficiaries or occupiers of the land who have an interest that may be affected by this application)

☐

YES (Complete the list of affected parties by providing their name and contact details)

☐

NO

Preferred place of hearing:

Signature of Applicant(s):

Dated: / /

Dated: / /

CONTACT DETAILS

Contact Address:

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(Address to which documents or correspondence in connection with the application can be posted or delivered)

Phone Number(s):

Home:

Work:

Mobile:

Fax:

Email Address:

NOTE: Where fax or email addresses are given these may be used as a means of notice and service.

Fee: \$

(Depending on the type of application a fee of \$23.00, \$68.00 or \$228.00 may apply. If you are unsure of the fee that applies please contact your local Māori Land Court office for further assistance)

MĀORI LAND COURT CONTACT DETAILS

Applications should be lodged with the Registrar in the Māori Land Court District in which some or all of the lands or the subject matter of the application is located.

TAITOKERAU

L3, Manaia House
41 Rathbone St
WHANGĀREI

DX Box AX10086
WHANGĀREI

PH: (09) 983 9940
Fax: (09) 983 9941
mlctaitokerau@justice.govt.nz

TAITOKERAU

Auckland Information Office
Avanti Finance Building
65B Main Highway
Ellerslie, AUCKLAND

DX Box EX10912
AUCKLAND

PH: (09) 279 5850
Fax: (09) 279 5852
mlctamakimakaurau@justice.govt.nz

WAIKATO-MANAPOTO

L2, BNZ Centre
354-358 Victoria St
HAMILTON

DX Box GX10101
HAMILTON

PH: (07) 957 7880
Fax: (07) 957 7881
mlcwaikato@justice.govt.nz

WAIARIKI

Hauora House
1143 Haupapa St
ROTORUA

DX Box JX10529
ROTORUA

PH: (07) 921 7402
Fax: (07) 921 7412
mlcwaiairiki@justice.govt.nz

TAIRĀWHITI

Ngā Wai e Rua Building
Cnr Lowe Str & Reads Quay
GISBORNE

DX Box PX10106
GISBORNE

PH: (06) 869 0370
Fax: (06) 869 0371
mlctairawhiti@justice.govt.nz

TĀKITIMU

L2, Heretaunga House
Corner Lyndon & Warren Strs
HASTINGS

DX Box MX10024
HASTINGS

PH: (06) 974 7630
Fax: (06) 974 7631
mlctakitimu@justice.govt.nz

AOTEA

Ingestre Chambers
74 Ingestre Street
WHANGANUI

DX Box PX10207
WHANGANUI

PH: (06) 349 0770
Fax: (06) 349 0771
mlcaotea@justice.govt.nz

TE WAIPOUNAMU

Justice and Emergency Precinct
20 Lichfield Street
CHRISTCHURCH

DX Box WX11124
CHRISTCHURCH

PH: (03) 962 4900
Fax: (03) 962 4901
mlctewaipounamu@justice.govt.nz

LIST OF AFFECTED PARTIES

The names and contact details of persons, groups or authorities who you think have an interest that might be affected by this application

Name

Postal Address

Email Address

Phone No.

Name

Postal Address

Email Address

Phone No.

Name

Postal Address

Email Address

Phone No.

Name

Postal Address

Email Address

Phone No.

Name

Postal Address

Email Address

Phone No.

Name

Postal Address

Email Address

Phone No.

SCHEDULE 2 WHAKAPAPA DETAILS

Note: Only complete this schedule if whakapapa is required for your application.

1. Full names of owner:

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2. Full names of owner's children:

a.	b.
c.	d.
e.	f.
g.	h.

3. Full names of owner's parents (please state relationship):

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4. Full names of owner's brothers and sisters: *(if any and specify whether full brother or sister, whether half brother or sister, whether any were adopted in or out of family, whether legally or as a whāngai)*

a.
b.
c.
d.
e.
f.
g.