



# NEW ZEALAND SOCIETY OF CONVEYANCERS

www.nzskonveyancing.co.nz info@nzskonveyancing.co.nz

## APPLICATION FOR ISSUE/RENEWAL OF A PRACTISING CERTIFICATE

REG.16(2) OF THE LAWYERS AND CONVEYANCERS ACT (CONVEYANCERS: REGISTRATION AND PRACTICE) REGULATIONS 2006

### AND MEMBERSHIP

#### INFORMATION TO APPLICANTS

##### PRACTISING CERTIFICATE

1. **Registered Conveyancers** who wish to practice;
  - as a Conveyancing Practitioner as a sole practitioner
  - as a Conveyancing Practitioner with an incorporated Conveyancing firm
  - as a Conveyancing Practitioner for a law firm
 are required to make application for a Practising Certificate.
2. All Conveyancing Practitioners hold a current Practising Certificate issued under LCA 2006. Only Conveyancing Practitioners (and lawyers) may provide regulated services.
3. The Practising Certificate is to be renewed annually. [The Society may, at its discretion, limit your regulated services to reserved areas of practice when the certificate is issued.]
4. It is your responsibility to ensure that you hold a current Practising Certificate at all times.

##### REQUIREMENTS

1. Completed Application form and Statutory Declaration with payment of all fees.
2. Registered Conveyancers with a Diploma of Conveyancing to provide evidence of two years conveyancing experience by way of a written statement in accordance with the Society's Prior Experience Guideline form, work references/s which relates to conveyancing experience and an updated CV. If applicable, the NZSoc may seek updated identification, address verification and completion of the Ministry of Justice Criminal Request report.
3. Where the applicant works for a law firm, an "Employer Indemnity Certificate" is to be signed by a Partner/Director (form provided by NZSoc) and to be renewed each time the applicant applies to have their Practising Certificate renewed.
4. Where the applicant works for a conveyancing firm or conveyancing practitioner, evidence of your minimum \$1m Professional Indemnity Insurance policy covering Fair Trading Act liability must be provided. The provider must have a minimum "A-" Standard & Poors or AM Best Claims Paying Ability rating and be approved by the NZ Society of Conveyancers. **[NZSoc holds the required Master PI Insurance policy for members who can be insured under this policy at a discounted rate – please contact the Society should you wish to take up this offer.]**
5. When setting up an Incorporated Conveyancing firm, the Society must be advised immediately of its name, names of directors and shareholders, and the structure and location of the business.
6. Conveyancing practitioners who operate a trust account are required by law and for insurance indemnity requirements to have their trust account audited at periodic intervals determined by the Society. The Society appoints the inspectorate and the inspectorate fee is paid by the Conveyancing firm concerned. An additional annual Inspectorate fee is paid to the Society to cover any additional investigation matters of each Conveyancing firm.



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Full Name: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
 Postal Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Email: \_\_\_\_\_

Business/Employer: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
 Postal Address: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

**Payment of Fees – please Direct Credit each fee individually to the account number and payee code as set out below.** Please also ensure that your name is detailed under the Payee Particulars of your direct credit.

FEES (incl GST)	AMOUNT	ACCOUNT NO	PAYEE CODE	PAYEE PARTICULARS
Annual Practising Certificate fee	\$690.00 *	<b>02-0816-0047741-00</b>	PC Fee	Your name
Practitioners Fidelity Fund contribution	\$345.00 *	<b>02-0816-0047741-02</b>	Fidelity	Your name
Annual Legal Education fee	\$20.80	<b>02-0816-0047741-00</b>	Legal Ed	Your name
Annual Inspectorate Fee (if operating a trust A/c)	\$26.50	<b>02-0816-0047741-00</b>	Inspectorate	Your name
Annual Legal Complaints Review Officer Levy	Levied by MOJ – to be advised	<b>02-0816-0047741-00</b>	LCRO	Your name

**\*New applicants may contact the Society for pro-rated calculations, if applicable**

I consent to the making of inquiries of, and the exchange of information with the authorities and relevant professional bodies in New Zealand and or in any other jurisdiction regarding matters relevant to this application/renewal, should it be necessary, including criminal history, and any complaints or disciplinary action that may have been drawn to the attention of a relevant professional body.

**SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**REGISTRATION NO:** \_\_\_\_\_



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## 2. MEMBERSHIP NB: MEMBERSHIP IS VOLUNTARY; MEMBERSHIP IS AT THE DISCRETION OF THE SOCIETY

Although membership is voluntary, membership fees assist with maintaining the existence of the Society and to enable Practising Conveyancers to practice.

### Membership

Any person may apply to join the Society either as:

1. A **full member** (Conveyancing Practitioners only);
2. An **affiliate member** (persons with an interest in Conveyancing who are not Conveyancing practitioners);
3. A **student member**

in which case they will pay a membership subscription to cover the representative functions of the Society.

### Payment (Rule 48 LCA (Conveyancing Practitioners) Conduct & Client Care) Rules 2008

Electronic payment of the appropriate subscription to be made to the Society's bank account as stated below.

***NB an invoice/receipt will only be issued on request.***

### Membership

I would like to: become a member/ renew my membership with the Society **YES / NO** (delete which one does not apply)

### Membership Subscription (incl. GST) (\* Life membership – Free)

<b>Full Membership</b> (Conveyancing Practitioner only) .....	\$345.00	_____
<b>Affiliate Membership</b> (Person with an interest in Conveyancing only) .....	\$172.50	_____
<b>Student Membership</b> (Conveyancer Trainee only) .....	\$57.50	_____

**Direct Credit to:** (please provide receipt)

FEE (incl GST)	AMOUNT	ACCOUNT NO	PAYEE CODE	PAYEE PARTICULARS
Membership fee	\$0.00	<b>02-0816-0047741-01</b>	Membership	Your name

**SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**MEMBERSHIP NO:** \_\_\_\_\_