Form P01

Answer / Response

### About this form

* This is the approved form to detail your answer, response or alternate contention to an application lodged with SAET
* This form may be completed electronically and lodged as an email attachment (not a scan). A signature is not required.

# Case details

Provide details of the case that this application relates to.

|  |  |  |
| --- | --- | --- |
| SAET Case number |  | Name of the party lodging this form |
|  |  |  |
| Names of parties to this case (as per SAET correspondence) |
|  |

Other proceedings before SAET

|  |  |  |
| --- | --- | --- |
| Are there any other proceedings before SAET involving the same parties to this application? |  | If Yes, provide Case number |
| [ ]  No [ ]  Yes |  |  |

Timeframe for Answer / response

If your case relates to:

|  |  |
| --- | --- |
| **Type of case** | **Answer / Response must be lodged no more than** |
| [ ]  Money claim (*Fair Work Act 1994 (SA)* or *Fair Work Act 2009 (Cth)*) | 14 days from service of the application |
| [ ]  Unfair dismissal (*Fair Work Act 1994 (SA)*) | 14 days from service of the application |
| [ ]  Resolution of dispute (*South Australian Skills Act 2008*) | 7 days from service of the application |
| [ ]  Equal Opportunity | 21 days from service of the Details of Complaint |
| [ ]  Any other case | The timeframe as directed by SAET |

Will your Answer / Response be lodged within the prescribed timeframe?

[ ]  Yes

[ ]  No – please provide reason(s) why it is late

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|  |

Answer / Response

Please provide a brief summary of your response to the dispute or grievance set out in the application. All parties will have an opportunity to expand on their positions during proceedings.

### Money claim answer (if relevant)

If the application relates to a Money Claim under the *Fair Work Act 1994 (SA)* or *Fair Work Act 2009 (Cth)*, do you:

[ ]  Admit liability wholly

[ ]  Deny liability wholly

[ ]  Deny liability in part

### All case types

#### Response to allegation

Set out concise statements of the response to each material fact alleged by the applicant / complainant

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|  |

#### Legal defence

Set out concise statements any legal defence you rely upon

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|  |

Your Details

|  |
| --- |
| Are you an individual or lodging on behalf of an organisation? |
| [ ]  Individual |
| [ ]  Organisation – specify | Organisation legal name |
|  |
| Organisation trading name |
|  |

#### Contact details

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Title |  | Given name |  | Other given names |  | Family name |
|  |  |  |  |  |  |  |
| Job title |  |  |
|  |  |  |
| Unit number |  | Street number |  | Street name / PO Box |  | Street type (eg Street, Road, Drive) |
|  |  |  |  |  |  |  |
| Suburb |  | State |  | Postcode |
|  |  |  |  |  |
| Phone |  | Mobile |  | Email (if provided, correspondence will be emailed) |
|  |  |  |  |  |
| Do you require an interpreter? |  | Do you have any other special requirements? |
| [ ]  No [ ]  Yes – specify language / dialect |  | [ ]  No [ ]  Yes – specify requirements |
|  |  |  |

### Representative details

Note for cases under the *South Australian Skills Act 2008*: In accordance with section 67, a party may not be represented by a lawyer or “registered agent”. SAET may permit a party to be assisted by a person, who is not a lawyer or “registered agent” only if that person is not acting for fee or reward.

|  |
| --- |
| Are you represented? |
| [ ]  Yes [ ]  No – go to *the next section* |
| Type of representative |
| [ ]  Legal [ ]  Employer association [ ]  Union [ ]  Advocate |
| Is the representative an individual or acting on behalf of a representative organisation? |
| [ ]  Individual |
| [ ]  Organisation – specify | Representative organisation name |
|  |

#### Representative contact details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title |  | Given name |  | Family name |
|  |  |  |  |  |
| Unit number |  | Street number |  | Street name / PO Box |  | Street type (eg Street, Road, Drive) |
|  |  |  |  |  |  |  |
| Suburb |  | State |  | Postcode |
|  |  |  |  |  |
| Phone |  | Mobile |  | Email (if provided, correspondence will be emailed) |
|  |  |  |  |  |

# Supporting attachments

Provide a brief description of any attachments supporting this form.

|  |
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|  |

LODGING YOUR COMPLETED FORM

By lodging this form I declare that the facts in this form are correct to the best of my knowledge and belief.

The person lodging this form must send a copy to all other parties to the case.

|  |  |  |
| --- | --- | --- |
| Name of person lodging the application |  | Date |
|  |  |  |

To lodge your completed form and any supporting attachments:

1. **Save the form and any supporting attachments to your computer** (Note – SAET does not require a signed version so there is no need to print and scan)
2. **Lodge the form and any supporting attachments:**
	* **Online** at[www.saet.sa.gov.au/existingcase](http://www.saet.sa.gov.au/existingcase) (preferred); or
	* **By email** to saet@sa.gov.au