Te Kooti Whenua Māori
Māori Land Court

Form 12
Rule 8.2

APPLICATION TO THE CHIEF JUDGE

Te Ture Whenua Māori Act 1993
Section 45

For more information visit www.māorilandcourt.govt.nz

WHAT IS THIS FORM FOR?

Use this form to file an application to the Chief Judge of the Māori Land Court to exercise their power under section 44 of Te Ture Whenua Māori Act 1993 to correct a mistake, error or omission on the part of the Court or in the presentation of the facts of a case to the Court.

This form should not be used to Appeal against a decision of the Māori Land Court or Māori Appellate Court nor should it be used to correct an administrative error in a minute or order of the Court.

HOW TO FILE AND COMPLETE THIS APPLICATION FORM

(i) This form must be accompanied with the appropriate application fee and be filed in the Office of the Chief Registrar;

(ii) Please ensure that all information required on the form is completed;

(iii) You must supply a list of affected parties to this application by completing the attached List of Affected 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:

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

.....

.....

.....

.....

.....

APPLICATION:

I / We .....(state full name)

.....

MAKE APPLICATION TO:

(Please tick and complete as appropriate ☑) make application to amend / cancel (delete one)

☐ Amend	☐ Cancel

☐ An order or orders of the Court dated .....

made at .....

.....

.....(give date and minute book reference(s)

OR

☐ A certificate of confirmation issued by a Registrar dated .....made at .....

.....

(give date and minute book reference)

NATURE OF ORDER / CERTIFICATE OF CONFIRMATION: (briefly describe the nature of the order)

.....

.....

.....

NOTE: Where more than one order is involved, please provide details of other orders on a separate sheet.

UPON THE FOLLOWING GROUNDS:

The said order(s) or certificate is/are incorrect for the following reason *(tick one)*:

☐ A mistake, error or omission on the part of the Court.

☐ A mistake, error or omission in the presentation of the facts of the case to the Court.

The mistake error or omission is:.....

.....

.....

.....

.....

.....

.....

.....

.....

(explain nature of mistake, error or omission and set out reasons why order is wrong)

I am / we are adversely affected by the order(s) because: . (state how you have been affected)

.....

.....

.....

.....

.....

.....

.....

.....

Preferred place of hearing:

NOTE: Where whakapapa is alleged to be incorrect, the applicant must enclose on a separate sheet details as to the error and his or her version of the correct whakapapa.

Signature of Applicant(s): Dated: / /

CONTACT DETAILS

Contact Address: .....

.....

(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: $ 228.00

RULE 8.2 OF THE MÄORI LAND COURT RULES 2011

(1) An application under section 45 of the Act must be in form 12 and filed at the office of the Chief Registrar.

(2) The following matters must be set out in the application:

(a) in respect of the order or certificate of confirmation that is the subject of the application,—

(i) the date of the order or certificate; and
(ii) a description of the land affected; and
(iii) the names of the owners affected or, in the case of succession, the name of the deceased:

(b) in respect of the mistake or omission sought to be corrected,—

(i) a statement of the nature of the mistake or omission, who made it, and how; or
(ii) if the mistake is an error of law, the nature of that error:

(c) in any case where whakapapa is alleged to be incorrect, the applicant's version of the correct whakapapa:

(d) details as to how the applicant or the person on whose behalf the application is made has been adversely affected by the order or certificate in question:

(e) the names and, where obtainable, the addresses of those persons who might be affected if the application is granted.

NOTE: The list of affected parties attached must be completed in accordance with rule 8.2(2)(e) above

MĀORI LAND COURT CONTACT DETAILS

This application must be lodged with the Chief Registrar of the Māori Land Court in Wellington

OFFICE OF THE CHIEF REGISTRAR

Māori Land Court
L7, Fujitsu Tower
141 The Terrace
WELLINGTON

DX Box SX11203
WELLINGTON

PH:(04)9143102
Fax: (04) 914 3100
mlc.chief-registrars.office@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. .....