



Transcription Order Form NT Local Court

| Submission of Form | | | |
|--|--|--|---|
| Email | transcripts.doj@nt.gov.au | | |
| Phone | (08) 8981 4424 | | |
| Matter Confirmation | | | |
| Name of proceedings | | | |
| Applicant | | | |
| Judge | | File number | |
| Location | | Court number | |
| Sitting time(s) & date(s) | | | |
| Details of Proceedings | | | |
| Nature | <input type="checkbox"/> Youth Justice Court | <input type="checkbox"/> Work Health Court | <input type="checkbox"/> Coronial |
| | <input type="checkbox"/> Local Court Crime | <input type="checkbox"/> Local Court Civil | <input type="checkbox"/> Other (provide details) |
| Other details | | | |
| Transcription Service | | | |
| Delivery | <input type="checkbox"/> Email | <input type="checkbox"/> Hard copy (collect) | \$15 / page |
| Invoice Details | | | |
| Company name | | | |
| Contact name | | Reference to be quoted on invoice | |
| Contact number | | Fax number | |
| Email | | | |
| Postal address | | Postcode | |
| Are you a party or a legal representative for a party to the proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If you ticked 'No', what is the nature / purpose of your request (e.g. private viewing, publication)? | | | |
| | | | |
| Terms & Conditions | | | |
| I declare that I am authorised to act on behalf of the above firm and agree that, notwithstanding any express or implied agency agreement which the firm or I may have with any third party, the above firm accepts responsibility for the payment of all accounts within 7 days of rendering of same by Epiq Australia Pty Ltd (Epiq). I agree to the following conditions: | | | |
| 1. Epiq may render interim invoices progressively at appropriate stages during the running of the above matter. | | | |
| 2. All interim and final invoices rendered must be paid strictly within 7 days of rendering of the invoice. | | | |
| 3. Epiq may withdraw its services at any time should any of the above conditions not be complied with. | | | |
| 4. Epiq is not affected by any express or implied arrangement or agreement of the ordering firm with any third party (including its client in the proceeding). | | | |
| 5. The person signing this order asserts and warrants that he/she has authority to do so on behalf of the ordering firm. | | | |
| 6. The ordering firm acknowledges that, upon acceptance of this order by Epiq, this order is irrevocable. | | | |
| | | | I have read and accept Epiq Australia's Terms & Conditions of business <input type="checkbox"/> |
| Print name | Signature | Date | |
| Local Court Approval | | | |
| Granted / Not Granted | | Signed (on behalf of) | Date |



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| Local Court Office Use Only | |
|---|--|
| Does the request relate to a Closed Hearing? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are there applicable Supression Orders? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have Epiq / Local Court staff been advised of the court decision? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Initials | Date |

| For office use only | | | | | | |
|---|----------|-------------|---------------|--------|---------------|---------------------|
| Received and accepted for and on behalf of Epiq Australia Pty Ltd | | | | | | |
| Name | | Signature | | | Date | |
| Date of proceedings | Page No. | Total Pages | Cost per Page | GST pp | Date supplied | Debit note required |
| | | | | | | |