

WESTERN AUSTRALIA

Legal Profession Uniform Law WA (Uniform Law)

Part 3.7

**Notice of termination of legal services by an incorporated legal practice in
Western Australia**

An incorporated legal practice must use this form to give the Legal Practice Board notice that it has ceased providing legal services in Western Australia within 14 days of ceasing to provide legal services.

Section A – Details of the Incorporated Legal Practice (ILP)

1	Name of the ILP:	_____
2	Australian Company Number:	_____
3	Date of incorporation:	____ / ____ / ____
4	Practice Name:	_____
5	Street address:	_____ _____
6	Postal address (if different):	_____ _____ _____
7	Telephone number: <i>(include STD code)</i>	() _____
8	Email address:	_____

Section B – Date ILP ceased providing legal services in WA

9 What is the date your ILP ceased providing legal services in WA? _____

10 Has the former ILP been taken over by an existing practice? No.
 Yes. Please provide the name and address of the law practice.

Section C – Closed practice files

11 If applicable please indicate where the safe custody documents are located. Please include address, contact details, firm names or any other arrangements. It is important to provide this information to assist the Board in the event the General Public contact us to locate their documents after the cessation of your practice

Section D – For your information

You are required to complete this form and provide it to the Legal Practice Board within 14 days after ceasing to engage in legal practice as an ILP: see rule 29 of the *Legal Profession Uniform General Rules 2015 (Uniform Rules)*.

Under section 104(3) of the Uniform Law, an ILP must give the Board written notice that it has ceased to engage in legal practice in this jurisdiction.

Section E – Instructions to complete this form

23 Please ensure that you have completed all sections of this form and if you are closing a trust account attach:

- Notification of Closure of Trust Account/Law Practice Closing Down.
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Section F – Certification

This must be signed by a legal practitioner director of the former ILP

I certify that:

- The information set out in this form is true and correct and I have not omitted any relevant information; and
- The ILP has complied with rule 78(6) of the *Legal Profession Uniform General Rules 2015* in relation to the provision of ongoing professional indemnity insurance cover.

Signed: _____

Full name: _____

(printed)

Date: _____