

## NOTIFICATION OF INTENTION TO COMMENCE MUTUAL GAINS BARGAINING

### COMMISSION DETAILS

Industrial Relations Commission of New South Wales

Case number

### NOTIFICATION

Notifier **[name]**  
#Representative [Name of representative] [industrial organisation or firm]  
Address  
Contact number  
Contact email  
Status of notifier  industrial organisation of employees or employers  
 employer who is or is likely to be a party to the bargaining

### OTHER PARTY/PARTIES

Party 2 contact [name] [telephone] [email]  
Party 2 representative [Name of representative] [industrial organisation or firm]  
#Additional parties if applicable [name] [telephone] [email]  
[Name of representative] [industrial organisation or firm]

### INSTRUMENT BEING NEGOTIATED

Award or enterprise agreement [name of proposed award(s) or enterprise agreement(s)]  
Current or recent applications to the Commission relevant to the proposed mutual gains bargaining [title]  
[case number(s)]

### INTENTION REGARDING APPOINTMENT OF FACILITATOR

Agreement regarding facilitator  Commission to act as facilitator.  
 Parties to appoint a third party to act as facilitator.  
 Parties request the Commission to appoint a facilitator.  
 Do not wish to appoint a facilitator.

#Third party facilitator contact details [name] [organisation] [telephone][email]

#Third party facilitator qualifications

1. [Details of skills, experience or qualifications of proposed third party facilitator]
- 2.

**SIGNATURE**

Signature of representative

Capacity [eg solicitor, authorised officer of industrial organisation]

Date of signature [date]

**REGISTRY ADDRESS**

Street address Industrial Relations Commission  
Level 10, 10 Smith Street  
Parramatta NSW 2150

Postal address PO Box 927  
Parramatta NSW 2124

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