**FORM NO. 1**

**APPLICATION FORM**

APPLICATION FOR AUTHORISATION TO OPERATE AS A LIMITED LIABILITY PARTNERSHIP UNDER SECTION 125 OF THE LEGAL SERVICES REGULATION ACT 2015

**Section 1 – Application**

I, ………………………………….., a partner in the relevant business named below, it being a relevant business as defined in section 99 of the Legal Services Regulation Act 2015, hereby apply to the Legal Services Regulatory Authority for authorisation for the relevant business to operate as a limited liability partnership.

**Section 2 – Relevant business**

Nature of the relevant business (i.e. partnership of solicitors or legal partnership): ……………………………………….

Name of the relevant business: ………………………………………..

Principal address of the relevant business: …………………………………………………………………………………………………..

If applicable, Law Society firm no.: ……………………………………

If applicable, legal partnership reference no.: ……………………………………

Telephone number: …………………………………….

Email address: ……………………………………

**Section 3 – Partner information**

I have entered the name, work address and professional details of each and every partner in the relevant business in the attached schedule.

**Section 4 – Professional indemnity insurance**

I confirm that the relevant business has in place professional indemnity insurance which complies with regulations made under section 47 of the Legal Services Regulation Act 2015 or under section 26 of the Solicitors Act 1994 for the time being in force or both, as applicable. I confirm the following policy details:

I confirm the following details of policy or policies, as appropriate:

Name of insurer and broker if applicable: …………………………………………………………………………………………………

Policy Number: ……………………….

Name of insurer and broker if applicable: …………………………………………………………………………………………………

Policy Number: ……………………….

Name of insurer and broker if applicable: …………………………………………………………………………………………………

Policy Number: ……………………….

**Section 5 – Confirmation of fee paid**

I confirm that the application fee of €575.00 was transferred to the Legal Services Regulatory Authority bank account on ……………………….. (date) using the relevant business name above.

**Section 6 - Consent to use of data**

By submitting this application the partners consent to the use of the data therein by the Legal Services Regulatory Authority in the carrying out of its functions under the Legal Services Regulation Act 2015. The Legal Services Regulatory Authority may share the information within this application with the Law Society of Ireland, the Bar of Ireland, the Honorable Society of King’s Inns and the partnership’s insurer(s) and broker(s), if applicable, for the purpose of verifying the data provided. By submitting this application the partners consent to the provision by the Law Society of Ireland, the Bar of Ireland, the Honorable Society of King’s Inns and the relevant insurer(s) and broker(s), if applicable to the Legal Services Regulatory Authority of any information sought by the Legal Services Regulatory Authority by way of verification of the within application.

Dated this day of 20 .

……………………………………. Signature.

**SCHEDULE TO THE APPLICATION FOR AUTHORISATION**

LIST OF PARTNERS

The name of the partners listed below should appear **exactly** as per the roll of practising barristers or the roll of solicitors, as appropriate.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Partner** | **Practising Barrister (PB)/****Practising Solicitor** | **Work address****(If different from the principal address)** | **PB No./ Solicitor No.** |
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The Statutory Declaration below should be completed by the person submitting the application

**STATUTORY DECLARATION**

I, …………………………………, do solemnly and sincerely declare that to the best of my knowledge and belief the contents of the within application and the schedule thereto are true and correct and I make this solemn declaration conscientiously believing the same to be true and by virtue of the Statutory Declarations Act 1938.

Signed: ………………………………………..

Declared before me……………………………………………… [name in capitals] a [notary public] [commissioner for oaths] [peace commissioner] [person authorised by [insert authorising statutory provision].......................................... to take and receive statutory declarations] by ……………………………..

[who is personally known to me],

Or

[who is identified to me by …………………………………………. who is personally known to me]

Or

[whose identity has been established to me before the taking of this Declaration by the production to me of passport no. …………………… issued on …………………… by the authorities of …………………, which is an authority recognised by the Irish Government]

Or

national identity card no. …………………… issued on …………………… by the authorities of …………………… [which is an EU Member State, the Swiss Confederation or a Contracting Party to the EEA Agreement]

Or

[Aliens Passport no. (document equivalent to a passport) …………………… issued on …………………… by the authorities of …………………… which is an authority recognised by the Irish Government]

Or

refugee travel document no. …………………… issued on …………………… by the Minister for Justice, Equality and Law Reform]

Or

travel document (other than refugee travel document) …………………… issued on …………………… by the Minister for Justice, Equality and Law Reform

at …………………… [place of signature] this …… day of …………… [date]

………………………………..

[signature of witness].