

**NOTES: Notification of new law practice (other than incorporated legal practices or unincorporated legal practices)**  
**Part 3.2 Legal Profession Uniform Law (Victoria)**

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This form is to be used for notification new law practices (other than incorporated legal practices or unincorporated legal practices). Those wishing to commence engaging in legal practice as a sole practitioner, law firm or community legal service should use this form.

The term 'law practice' is defined in the Legal Profession Uniform Law (Victoria) ('the Uniform Law') as follows:

**"law practice" means:**

- a) a sole practitioner; or
- b) a law firm; or
- c) a community legal service; or
- d) an incorporated legal practice; or
- e) an unincorporated legal practice

Other forms are available for those wishing to commence legal practice as an incorporated legal practice or unincorporated legal practice. Please see the 'Notification of intention to start providing legal services' form for those practices.

Please ensure you provide the following information:

for each **a sole practitioner**:

- (i) the practitioner's name and address for service;
- (ii) any conditions imposed on the practitioner's Australian practising certificate in relation to engaging in legal practice; and
- (iii) any business name under which the practitioner carries on business.

for each **law firm** that engages in legal practice in this jurisdiction:

- (i) the firm's name and address for service; and
- (ii) any business name under which the firm carries on business; and
- (iii) the name of each partner of the firm;

for each **community legal service**

- (i) the service's name and address for service; and
- (ii) the name of each supervising legal practitioner for the service.

**Professional indemnity insurance**

Before commencing to engage in legal practice in Victoria, each legal practitioner must hold, or be covered by an approved insurance (professional indemnity) policy. Incorporated legal practices and community legal services must hold an approved insurance policy themselves and the policy must cover the legal practice in which they are engaged. Please see Part 4.4 of the Uniform Law and section 13 of the *Legal Profession Uniform Law Application Act 2014 (Vic)* for these requirements.

Upon confirmation of registration of the entity, you will be required to provide the entity identification number to the Legal Practitioners Liability Committee (LPLC) in order to obtain a certificate of Insurance (COI). Once the COI has been issued by the LPLC, you must provide this office with a copy via the [Lawyer Enquiry Form](#) to complete the registration process. If you are an interstate entity seeking to be registered in Victoria, please include your current COI to accompany this form.

**Trust money**

A law practice that receives trust money to which Part 4.2 of the Uniform Law applies must establish and maintain a general trust account in Victoria in accordance with the Legal Profession Uniform General Rules 2015. Law practices are required to notify the Board upon establishing a trust account of the details of the trust account and the appointment of an approved external examiner of trust records.

Law practices should use the following forms:

- Notification of trust account details in accordance with Rule 57;
- Notification of appointment of approved external examiner in accordance with Rule 66;
- Notification of termination of appointment of approved external examiner in accordance with Rule 66.

**Notification of new law practice (other than incorporated legal practice or unincorporated legal practice)**

Type of law practice (please tick):	
<input type="checkbox"/> Sole practitioner	<input type="checkbox"/> Solicitor
<input type="checkbox"/> Law firm	<input type="checkbox"/> Community Legal Service
<input type="checkbox"/> Barrister	
New law practice name:	
ABN:	
Business Name(s): _____	
_____	
<i>[provide all business names under which the law practice intends to engage in legal practice]</i>	
Date to commence in legal practice: ____ / ____ / ____	

**Address for service** *[must be street address, not P.O. Box or DX]*

Building, Level:	
Street:	
Suburb/Town:	
State:	Postcode:

**Other addresses** *[optional]*

PO/GPO Box:	Suburb:
Postcode:	State:
DX No.:	DX Suburb:

**Preferred mailing address** *[please tick]*  **Address for Service** *[street address]*  **PO Box**  **DX**

Phone:	Fax:
Email:	
Web Address:	

**Branch address**

Building, Level:	
Street:	
Suburb/Town:	
State:	Postcode:

**Other branch addresses** *[optional]*

PO/GPO Box:	Suburb:
Postcode:	State:
DX No:	DX Suburb:

**Preferred mailing address** *[please tick]*  **Address for Service** *[street address]*  **PO Box**  **DX**

Phone:	Fax:
Email:	
Web Address	

**Name of each Partner/Supervising legal practitioner/Sole practitioner**

Practitioner ID	Practitioner name	Position type
		<input type="checkbox"/> Partner <input type="checkbox"/> SLP <input type="checkbox"/> Sole practitioner
		<input type="checkbox"/> Partner <input type="checkbox"/> SLP
		<input type="checkbox"/> Partner <input type="checkbox"/> SLP
		<input type="checkbox"/> Partner <input type="checkbox"/> SLP
		<input type="checkbox"/> Partner <input type="checkbox"/> SLP

If insufficient space, attach extra sheet

**Approved Clerk details** *[barristers only]*

Barrister's Clerk name:
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**Privacy**

The Victorian Legal Services Board complies with the privacy principles set out in the *Privacy and Data Protection Act 2014*. All personal information you provide will be handled in accordance with this Act. The collection of the information on this form is required by the *Legal Profession Uniform Law Application Act 2014*. Information held by the Victorian Legal Services Board may be disclosed to various organisations, including the Victorian Civil and Administrative Tribunal, the Law Institute of Victoria Ltd, Victorian Bar Inc., Victoria Police and corresponding interstate authorities in order to carry out its duties under the *Legal Profession Uniform Law Application Act 2014*.

**I confirm that the information in this notice is true and correct**

\_\_\_\_\_  
*[Signature of Principal]*

\_\_\_\_\_  
*[Name of Principal (please print)]*

\_\_\_\_\_  
*[Practitioner ID of Principal]*

\_\_\_\_\_  
*[Position in law practice]* Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please return the completed form with any attachments to us via our Lawyer Enquiry web form:  
<https://lsbc.vic.gov.au/lawyers/lawyer-enquiry-form>