



File No:

ADR Form 04 | Mediator's Certificate

MEDIATOR'S CERTIFICATE

Date:

File No(s):

(As per Originating Process)

Respondent: (As per Originating Process)

I, (name of mediator)

Certify that:

1. On (date), I conducted a court supervised mediation in this case pursuant to the order made by (name) on (date)

2. The following persons attended the mediation: (insert names and roles of all persons who attended and on behalf of which party, e.g. Mr Smith, solicitor for the applicant; Mrs King, expert witness)

3. The outcome of the mediation was: (tick the applicable box)

- ☐ The mediation has been adjourned for a further mediation session on (date)
- ☐ The mediation has been concluded without the parties reaching agreement on any issue.
- ☐ The parties have reached agreement on all of the following issue(s): (please specify)



In accordance with: *(tick whichever is applicable)*

- ☐ the proposed consent orders
- ☐ the agreement enclosed in the attached sealed envelope marked: ***“Mediation Agreement. Not to be opened without an order of the Land Court of Queensland, Court file No...”***
- ☐ another type of agreement *(e.g. a confidential agreement the parties have agreed not to provide to the court – please specify)*

- ☐ (tick if applicable) **After consultation with the parties, I recommend the following directions are made for the further conduct of the case:** *(insert proposed directions and attach any agreed documents, e.g. statement of agreed facts or list of issues of fact and law)*



☐ I have read and understood the Privacy Statement below.

Privacy Statement

The Land Court and Tribunal Registry (which forms part of the Department of Justice and Attorney-General) is collecting information provided on and with this form to assess the suitability of the matter for the dispute resolution services.

Please ensure that the personal information you provide on this form is true and correct, including the information you provide about other parties.

Any information you provide will only be used by the Registry for the purpose for which it was provided. For more information about how DJAG manages personal information please refer to DJAG's [Privacy Guide](#).

Name of signatory:

X

(please select date of signing)

MEDIATOR'S CERTIFICATE – Filed on Behalf of the Mediator

Name:

Address:

<input type="text"/>	Suburb:	<input type="text"/>	State:	<input type="text"/>	Postcode:	<input type="text"/>
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Contact number(s):

<input type="text"/>	<input type="text"/>
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Email address:

PROCEDURE FOR FILING

Once this form has been completed and signed, please save this form and attach the saved document as an email; addressed as follows:

To: landcourt@justice.qld.gov.au

Cc: (all relevant parties that this form relates to i.e. the persons involved in the mediation)

Subject: Lodgement of **ADR Form 04** - Mediator's Certificate – Party Details (e.g. LVA 11-19 Jones v Valuer-General)