

# FORM 5 EXEMPTION APPLICATION

ABN 42 522 803 276

THE LAW SOCIETY OF SOUTH AUSTRALIA  
 COMPULSORY PROFESSIONAL INDEMNITY INSURANCE SCHEME  
 REQUEST FOR EXEMPTION FOR THE PERIOD 1/01/2012 TO 30/06/2012

IF YOU EXERCISE THE RIGHT OF PRIVATE PRACTICE AT ALL  
 YOU CANNOT CLAIM EXEMPTION

I, .....  
 (full name in block letters)

of .....  
 (address)

..... Telephone: .....

undertake not to practise as a Legal Practitioner otherwise than in the course of my employment

with .....

who is not a legal practitioner. **OR UNDERTAKE NOT TO PRACTISE AS A LEGAL PRACTITIONER.**

In consideration of this undertaking, I request that I be granted an exemption from the requirement to take out insurance pursuant to Section 52 of the Legal Practitioners Act, 1981.

I note that any exemption I may be granted **will expire on the date on which I commence to practise on my own behalf or as an employee of a legal practitioner** and that should this happen, I must obtain insurance forthwith. I acknowledge the provisions of section 19(1)(b) of the Act that my **FAILURE TO OBTAIN INSURANCE WILL RESULT IN MY PRACTISING CERTIFICATE BEING SUSPENDED AUTOMATICALLY BY OPERATION OF LAW.**

Dated this ..... day of ..... 20.....

SIGNED ..... (Applicant)

Please forward:

- (a) **FORM 1** – application for a practising certificate
- (b) This form completed
- (c) Cheque payable to **The Law Society of South Australia for \$293.00 (GST Exempt).**

Send to: The Legal Practitioners Registry  
 124 Waymouth Street, Adelaide, 5000  
 (DX 333), GPO Box 2066 Telephone (08) 8229 0251