

From: David Lyons

Sent: Wednesday, 23 November 2016 1:47 PM

To: Chambers - Gostencnik DP

Cc: Shane Kelley

Subject: Discontinuance of Matter AM2014/195 - s.156 Proposed Traffic Management Award

Attention of the Associate to Deputy President Gostencnik

Dear Associate,

Please find **attached** my Form 53 – *Notice of representative commencing to act* for the Applicant, the Traffic Management Association of Australia in this matter.

The Applicant is unable and unlikely to reach a consensus with various other stakeholders within the Traffic Management Industry in regards to the proposed Traffic Management Award.

The Applicant has instructed my firm to seek a full discontinuance of their applicant for the proposed new Award, hence please find **attached** Form F50 – *Notice of Discontinuance*.

Therefore, we respectfully request the Fair Work Commission vacate the Conference listed for 7 December 2016.

We thank the Fair Work Commission and his Honour for their assistance and patience in this matter.

If the FWC has any further enquiry please don't hesitate to contact the undersigned direct.

Regards

David Lyons JP (Qual)

Director and Principal Consultant

Form F53 Notice of representative commencing to act

Fair Work Act 2009, s.596 and Fair Work Commission Rules 2003, Rules 11 and 12

This is a notice to the Fair Work Commission that a lawyer or paid agent is commencing to act in a matter in accordance with the Fair Work Act 2009.

The represented party



These are the details of the person who a lawyer or paid agent is commencing to act for in a matter.

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other please specify: Employer Organization		
First name(s)	N/A		
Surname	N/A		
Postal address	Po Box 474		
Suburb	Albion		
State or territory	QLD	Postcode	4010
Phone number	1300 798 772	Fax number	N/A
Email address	shane.kelly@tmaa.asn.au		

If the represented party is a company or organisation please also provide the following details

Legal name of business	Traffic Management Association of Australia
Trading name of business	TMAA
ABN/ACN	31 212 135 038
Contact person	Shane Kelly

The party's representative



These are the details of the person or organisation that is representing the party in the matter.

Name of person	David Lyons		
Organisation	Workplace Solutions		
Postal address	Suite 31109 , 2 Harbour Road		
Suburb	Hamilton		
State or territory	QLD	Postcode	4007
Phone number	073160 5646	Fax number	
Email address	david@ausws.com.au		

The other party



These are the details of the other party in the matter.

Title Mr Mrs Ms Other please specify:

First name(s)

Surname

Postal address

Suburb

State or territory

Phone number

Email address

1. Details of the matter

1.1 What is the name and matter number of the matter before the Commission?

Matter Number: AM2014/195

Proposed Traffic Management Award

s.156 – 4 yearly review of modern Awards

1.2 Which party are you commencing to act for in the matter before the Commission?

- Applicant
 Respondent
 Other

Provide details of the party if it is not the applicant or respondent.

Signature



If you are completing this form electronically and you do not have an electronic signature you can attach, it is sufficient to type your name in the signature field. You must still complete all the fields below.

Signature

Name

David Lyons

Date

23rd November 2016

Capacity/Position

Applicant's representative / paid agent

Form F50—Notice of discontinuance

Fair Work Act 2009, s588; *Fair Work Commission Rules 2013*, rule 10 and Schedule 1

This is a notice of discontinuance of an application with the Fair Work Commission in accordance with section 588 of the *Fair Work Act 2009*.

Fair Work Commission matter number

Matter number AM2014/195

The Applicant

First name(s) Traffic Management Association of Australia

Surname

The Respondent

Contact person N/A

Legal name of business

Trading name of business

The Applicant:

- Wholly discontinues this matter
 Wholly discontinues this matter as part of a settlement agreement
 Wholly discontinues this matter to pursue an alternate application

Signature



If you are completing this form electronically and you do not have an electronic signature you can attach, it is sufficient to type your name in the signature field. You must still complete all the fields below.

Signature

Name

David Lyons

Capacity/Position

Applicant's Representative

Date

23rd November 2016



Where this form is not being completed and signed by the Applicant, include the name of the person who is completing the form on their behalf in the **Capacity/Position** section.

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS