



NOTIFICATION OF DISPUTE FORM

PHONE: 03 9348 2613 EMAIL: dboard@vbidb.org.au

PLEASE NOTE THAT ALL SECTIONS AND DETAILS MUST BE COMPLETED

NOTIFIER OF DISPUTE:

NAME:

FULL CONTACT DETAILS OF NOTIFIER:

NAME:

UNION/COMPANY:

EMAIL:

MOBILE:

LANDLINE:

FULL CONTACT DETAILS OF EMPLOYER:

NAME:

COMPANY:

EMAIL:

MOBILE:

LANDLINE:

PROJECT NAME AND LOCATION, IF APPLICABLE, AND NUMBER OF EMPLOYEES INVOLVED:



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EMPLOYER REPRESENTATIVES / UNION REPRESENTATIVES AND ANY OTHERS WHO ARE TO RECEIVE A COPY OF NOTIFICATION.

NAME: EMAIL: MOBILE:

NAME: EMAIL: MOBILE:

NAME: EMAIL: MOBILE:

NAME: EMAIL: MOBILE:

UNIONS INVOLVED IN THE DISPUTE: (x) PLEASE SELECT UNIONS INVOLVED

ALL UNIONS:

CFMMEU:

CEPU (PPTEU):

ENTERPRISE AGREEMENT ID NUMBER(S):

FULL TITLE OF ENTERPRISE AGREEMENT(S)



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SPECIFIC ISSUES IN CONTENTION: PLEASE SUMMARISE THE SPECIFIC MATTERS THAT ARE ALLEGED TO BE IN DISPUTE:

CURRENT STATUS OF THE DISPUTE: IS WORK PROCEEDING AS NORMAL?

(X) PLEASE SELECT

YES:

NO:

IF NO, PLEASE PROVIDE DETAILS:

PROVIDE A BRIEF HISTORY OF THE DISPUTE AND EXPLANATION OF THE STEPS TAKEN IN ACCORDANCE WITH THE DISPUTES PROCEDURE TO ENDEAVOUR TO RESOLVE THE DISPUTE. [PLEASE ATTACH ALL RELEVANT CORRESPONDENCE BETWEEN THE PARTIES AND/OR RELEVANT DOCUMENTATION]:



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DATE(S) OF MEETING(S)	NAME AND POSITION OF EMPLOYER REPRESENTATIVE IN ATTENDANCE	NAME AND POSITION OF EMPLOYEE REPRESENTATIVE IN ATTENDANCE

(x) PLEASE SELECT WHICH OF THE PANEL'S SERVICES ARE REQUESTED:

CONFERENCE WITH PANEL:

HEARING BY PANEL:

CONFERENCE WITH CHAIRPERSON:

SITE INSPECTION:

SIGNATURE OF NOTIFIER:

DATE:
