

Sample Claim Form

[Your address]

[Date]

To: The Registrar
Waitangi Tribunal
DX SX 11237
Wellington

1. I / We [Insert name(s), address(es), iwi /hapū, am / are Māori].
2. For ourselves and [Names of any group(s) on whose behalf the claim is made]
3. Claim we have been / are likely to be prejudicially affected by [Describe the actions of the Crown, and detail how those actions have caused prejudice].
4. And we claim that these matters are contrary to the principles of the Treaty of Waitangi.
5. We ask for permission to amend this claim, if necessary.
6. The Tribunal is advised that our legal representative is [Name of your lawyer (if you have one) and their full postal address and fax and telephone numbers].
7. We believe the following persons and organisations should be notified of this claim: [List names and addresses]
7. This claim amends / replaces our earlier claim of [Date of earlier claim].
[Note: Leave this section out if this is your first statement of claim.]
8. We can be contacted care of the following address: [Address and phone number]

Date: [Date]

Name(s): [Print name(s)]

Signature(s): [Your signature(s)]