About the F83 application form

# Application for a single interest employer authorisation

## About single interest employer authorisations

The Fair Work Commission (Commission) may make a **single interest employer authorisation** under section 249 of the [Fair Work Act 2009](https://www.legislation.gov.au/Series/C2009A00028) in relation to a proposed multi-enterprise agreement that will cover employers that are franchisees or have common interests.

For more information about single interest employer authorisations, see the Commission’s [Enterprise Agreements Benchbook.](https://www.fwc.gov.au/resources/benchbooks/enterprise-agreements-benchbook)

## When to use this form

Use this form to apply for a single interest employer authorisation in relation to a proposed multi-enterprise agreement.

An application for a single interest employer authorisation can be made by:

* the employers that will be covered by the proposed multi-enterprise agreement, or
* a bargaining representative of an employee who will be covered by the proposed agreement.

If the application is being made by the employers that will be covered by the proposed multi-enterprise agreement, the employers should lodge a single application signed by or on behalf of all the employers.

## Lodging and serving your completed form

1. **Lodge** with the Commission:

[ ]  This **form**

[ ]  A **draft authorisation** that specifies:

* the employers that will be covered by the agreement, and
* the employees who will be covered by the agreement, and
* the person (if any) nominated by the employers to make applications under the Fair Work Act 2009 if the authorisation is made.

Lodge by email, post or in person at the [Commission office](https://www.fwc.gov.au/disputes-at-work/how-the-commission-works/commission-offices) in your state or territory.

**2. As soon as practicable** after lodging, **serve a copy** of all documents lodged with the Commission on all of the following:

* each employer specified in the application
* each employee organisation that is a bargaining representative for the proposed agreement
* any other bargaining representative for the proposed multi-enterprise agreement of which the applicant is aware.

 You can serve documents several ways, including by email, express post or registered post.

## Where to get help

### Commission staff & resources

Commission staff cannot provide legal advice. However, staff can give you information on:

* processes in the Commission
* how to make an application to the Commission
* how to fill out forms
* where to find useful documents such as legislation and decisions, and
* other organisations that may be able to assist you.

The Commission's website [www.fwc.gov.au](https://www.fwc.gov.au) also contains a range of information that may assist.

### Throughout this form

|  |  |
| --- | --- |
|  | This icon appears throughout the form. It indicates information to help you complete the form. |

### Legal or other representation

Representation is where another person (such as a lawyer or paid agent, or an employee of a union or employer organisation) speaks or acts on a person’s behalf or assists a person in certain other ways in relation to a matter before the Commission. There is no requirement to be represented at the Commission.

There are some restrictions on representation by a lawyer or paid agent.

Generally, a person must give notice to the Commission (by lodging a *Form F53 – Notice that a person: (a) has a lawyer or paid agent; or (b) will seek permission for a lawyer or paid agent to participate in a conference or hearing*) and seek permission from the Commission Member dealing with the matter if they wish to have a lawyer or paid agent represent them by participating in a conference or a hearing.

Apart from participating in a conference or hearing, a person’s lawyer or paid agent can represent them without permission, unless the Commission decides otherwise. For example, the lawyer or paid agent can prepare and lodge written applications, responses and submissions with the Commission, and communicate in writing with the Commission and other parties to the matter on the person’s behalf.

The requirement to give notice and seek permission for a lawyer or paid agent to participate in a conference or hearing, does not apply if the lawyer or paid agent is:

* an employee or officer of the person
* a bargaining representative that is representing the person, or
* an employee or officer of an employee or employer organisation, or an association of employers or a peak council, that is representing the person.

Rule 13(2) of the [Fair Work Commission Rules 2024](https://www.legislation.gov.au/Series/F2013L02054) sets out further exceptions to the requirement to give notice and seek permission.

For more information about representation by lawyers and paid agents, see section 596 of the [Fair Work Act 2009](https://www.legislation.gov.au/Series/C2009A00028), rules 11, 12, 13 and 14 of the [Fair Work Commission Rules 2024](https://www.legislation.gov.au/Series/F2013L02054) and the Commission’s [practice note on representation by lawyers and paid agents](https://www.fwc.gov.au/resources/practice-notes/lawyers-and-paid-agents).

## Glossary of common terms

**Applicant** – This is the person or organisation that is making an application.

**Lawyer** – This is a person who is admitted to the legal profession by a Supreme Court of a State or Territory.

**Paid agent** – In relation to a matter before the Commission, is an agent (other than a bargaining representative) who charges or receives a fee to represent a person in the matter.

**Party** – A party is a person or organisation involved in a matter or case that is brought to the Commission.

**Respondent** – The person or business responding to an application made by an Applicant.

**Service** – Serving a document means giving a copy of the document to a person or organisation, usually to the other party to the matter. You can serve a document in a number of ways, including by email, express or registered post, or in person. Part 5 of Chapter 1, rule 52 and Schedule 1 of the Fair Work Commission Rules 2024 deal with service.

## Privacy

The Commission collects the information (including personal information) provided to it in this form for inclusion on the case file, and may disclose this information to the other parties to this matter and to other persons. For more details of the Commission’s collection, use and disclosure of this information, please see the [Privacy notice](http://www.fwc.gov.au/documents/forms/Form-F83-privacy.pdf) for this form, or ask for a hard copy to be provided to you.

|  |  |
| --- | --- |
|  | **Remove this cover sheet** and keep it for future reference – it contains useful information |

# Form F83 – Application for a single interest employer authorisation

*Fair Work Act 2009*, section 248, *Fair Work Commission Rules 2024*, rule 52 and Schedule 1

This is an application to the Fair Work Commission under section 248 of the [Fair Work Act 2009](https://www.legislation.gov.au/Series/C2009A00028) for a single interest employer authorisation.

## The Applicant(s)

|  |  |
| --- | --- |
|  | The Applicant(s) for a single interest employer authorisation must be either:* the employers that will be covered by the proposed multi-enterprise agreement, or
* a bargaining representative of an employee who will be covered by the proposed agreement.
 |

### Who is making this application?

### [ ]  The employers that will be covered by the proposed multi-enterprise agreement

[ ]  An employee organisation that is a bargaining representative of an employee who will be covered by the proposed multi-enterprise agreement

[ ]  A bargaining representative appointed by an employee who will be covered by the proposed multi-enterprise agreement

### If the application is being made by the employers covered by the proposed multi-enterprise agreement, specify how many employers there are:

|  |
| --- |
|  |

### If the Applicants are the employers covered by the proposed multi-enterprise agreement, provide details for each employer:

|  |  |
| --- | --- |
| Legal name of employer |  |
| Employer’s ACN (if a company) |  |
| Employer’s trading name or registered business name (if applicable) |  |
| Employer’s ABN (if applicable) |  |
| Contact person |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

|  |  |
| --- | --- |
| Legal name of employer |  |
| Employer’s ACN (if a company) |  |
| Employer’s trading name or registered business name (if applicable) |  |
| Employer’s ABN (if applicable) |  |
| Contact person |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

Attach additional pages if there are more than 2 employer Applicants

### If the Applicant is an employee organisation that is a bargaining representative of an employee who will be covered by the proposed multi-enterprise agreement, provide details of the organisation:

|  |  |
| --- | --- |
| Name of employee organisation |  |
| Contact person |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

### If the Applicant is a bargaining representative appointed by an employee who will be covered by the proposed multi-enterprise agreement, provide details of the bargaining representative:

|  |  |
| --- | --- |
| Legal name of employee bargaining representative |  |
| ACN (if applicable) |  |
| Trading name or registered business name (if applicable) |  |
| ABN (if applicable) |  |
| Contact person (if applicable) |  |
| Relationship of bargaining representative to employer (if applicable) |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |

### Do you need an interpreter?

If you have trouble accessing this information, please contact us. We can arrange to provide it in another format. You can find information about [help for non-English speakers](https://www.fwc.gov.au/about-us/contact-us/accessibility) on our website.

|  |
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|  |

[ ]  Yes – Specify language

[ ]  No

### Do you require any special assistance at the hearing or conference (e.g. a hearing loop)?

|  |
| --- |
|  |

[ ]  Yes – Please specify the assistance required

[ ]  No

### Does the Applicant have a representative?

|  |  |
| --- | --- |
|  | A representative is a person or organisation that is representing an Applicant. There is no requirement to have a representative. |

[ ]  Yes – Provide representative’s details below

[ ]  No

### The representative

|  |  |
| --- | --- |
|  | These are the details of the person or organisation that is representing an Applicant (if any). |
| Name of person |  |
| Firm, organisation, company |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

### If there is more than one representative, attach additional pages and indicate which Applicant each representative represents

### Is the representative a lawyer or paid agent?

|  |  |
| --- | --- |
| [ ]  Yes – please select: | ☐ Lawyer☐ Paid agent |
| [ ]  No  |  |

## 1. Other bargaining representatives for the proposed multi-enterprise agreement

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | These are the details of all the other bargaining representatives for the proposed multi-enterprise agreement. |

### 1.1 Provide details of all the employers that will be covered by the proposed multi-enterprise agreement.

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | If the Applicants are the employers, you do not need to provide their details again. |
| Legal name of employer |  |
| Employer’s ACN (if a company) |  |
| Employer’s trading name or registered business name (if applicable) |  |
| Employer’s ABN |  |
| Contact person |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

|  |  |
| --- | --- |
| Legal name of employer |  |
| Employer’s ACN (if a company) |  |
| Employer’s trading name or registered business name (if applicable) |  |
| Employer’s ABN (if applicable) |  |
| Contact person |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

Attach additional pages if there are more than 2 employers that will be covered by the proposed agreement

### 1.2 Provide details of all the employee organisations that are bargaining representatives of employees who will be covered by the proposed multi-enterprise agreement.

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | If the Applicant is an employee organisation, you do not need to provide the Applicant’s details again. |
| Name of employee organisation |  |
| Contact person |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

Attach additional pages if necessary.

### 1.3 Did any of the employees who will be covered by the proposed multi-enterprise agreement appoint bargaining representatives?

[ ]  Yes

[ ]  No

If you answered **Yes** – Provide details of each employee bargaining representative:

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | If the Applicant is an employee bargaining representative, you do not need to provide the Applicant’s details again.A work address and contact details (rather than a home address and private contact details) can be given for an employee bargaining representative who is an individual.Do not include employees who participated in bargaining because they are representatives of an employee organisation that is a bargaining representative. Employee bargaining representatives are identified by their written instrument of appointment. |
| Legal name of employee bargaining representative |  |
| ACN (if applicable) |  |
| Trading name or registered business name (if applicable) |  |
| ABN (if applicable) |  |
| Contact person (if applicable) |  |
| Relationship of bargaining representative to employer (if applicable) |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

Attach additional pages if necessary

### 1.4 Did any of the employers that will be covered by the proposed multi-enterprise agreement appoint bargaining representatives?

[ ]  Yes

[ ]  No

If you answered **Yes** – Provide details of each employer bargaining representative:

|  |  |
| --- | --- |
| Name of employer bargaining representative |  |
| Employer represented by the bargaining representative |  |
| Contact person |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |
| Phone number |  |
| Email address |  |

Attach additional pages if necessary

## 2. Preliminary

### 2.1 What industry is each employer that will be covered by the proposed multi-enterprise agreement in?

|  |
| --- |
|  |

### 2.2 Provide the following:

* **The number of employees each employer currently has, and**
* **The employees of each employer that will be covered by the proposed multi-enterprise agreement.**

|  |  |  |  |
| --- | --- | --- | --- |
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|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | For each employer that will be covered by the proposed multi-enterprise agreement, you must specify the number of employees that employer currently has and the employees who will be covered by the proposed agreement. Section 249(3AC) of the Act specifies how the number of employees is calculated. |

 |
| Employer | Number of employees | Employees covered  |
|  |  |  |
|  |  |  |
|  |  |  |

### 2.3 Have the employers that will be covered by the proposed multi-enterprise agreement nominated a person to make applications under the Fair Work Act 2009 if the single interest employer authorisation is made?

[ ]  Yes

[ ]  No

If you answered **Yes**—Provide details of the person nominated by the employers:

|  |  |
| --- | --- |
| Legal name of person |  |
| ACN (if applicable) |  |
| Trading name or registered business name (if applicable) |  |
| ABN (if applicable) |  |
| Contact person (if applicable) |  |
| Postal address |  |
| Suburb |  |
| State or territory |  | Postcode |  |

## 3. Application made by the employers

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | Only complete section 3 if the Applicants are the employers that will be covered by the proposed multi-enterprise agreement.See sections 249(1)(a)(iii) and 249(1A) of the Fair Work Act 2009. |

### 3.1 If the Applicants are the employers that will be covered by the proposed multi-enterprise agreement, have all of the employers agreed to bargain together?

[ ]  Yes

[ ]  No

|  |
| --- |
|  |

### 3.2 If the Applicants are the employers that will be covered by the proposed multi enterprise agreement, state the steps taken by the employers to agree to bargain together.

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** |  The employers that will be covered by the agreement must agree to bargain together. The employers must not have been coerced, or threatened coercion, by any person to agree to bargain together.See sections 249(1A)(a) and (b) of the Fair Work Act 2009. |
| Date(s) | Steps taken to provide to agree to bargain together. |
|  |  |
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## 4. Application made by a bargaining representative of an employee

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | Only complete section 4 if the Applicant is a bargaining representative of an employee who will be covered by the proposed multi-enterprise agreement.See sections 249(1)(b)(iv), 249(1B) and 249(1D) of the Fair Work Act 2009. |

### 4.1 If the Applicant is a bargaining representative of an employee who will be covered by the proposed multi-enterprise agreement, has each employer that will be covered by the proposed agreement consented to the application?

[ ]  Yes—Go to section 5

[ ]  No—Answer questions 4.2–4.4

|  |
| --- |
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### 4.2 Is each employer that will be covered by the proposed multi-enterprise agreement covered by sections 249(1B)(a)–(c) of the Fair Work Act 2009?

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | An employer is covered by sections 249(1B)(a)–(c) if:* the employer employs at least 20 employees at the time this application is made
* the employer has not applied for a single interest employer authorisation that has not yet been decided in relation to the employees who will be covered by the proposed agreement, and
* the employer is not named in a single interest employer authorisation or supported bargaining authorisation in relation to the employees who will be covered by the proposed agreement.

Section 249(3AC) of the Act specifies how the number of employees is calculated. |

[ ]  Yes

[ ]  No

### 4.3 For each employer that will be covered by the proposed multi-enterprise agreement, do a majority of the employees of the employer who will be covered by the proposed agreement want to bargain for the proposed agreement?

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | See sections 249(1B)(d) and 249(1C) of the Fair Work Act 2009. For each employer that will be covered by the proposed agreement, a majority of the employees employed by the employer at a time determined by the Commission and who will be covered by the proposed agreement, must want to bargain for the proposed agreement.The Commission may work out whether a majority of employees want to bargain using any method it considers appropriate. |

[ ]  Yes

[ ]  No

If you answered **Yes**—Explain how and at what time the Applicant determined that a majority of the employees of each employer who will be covered by the proposed agreement, want to bargain for the proposed agreement:

|  |
| --- |
|  |

### 4.4 Does section 249(1D) apply to any employer that will be covered by the proposed multi-enterprise agreement?

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | Section 249(1D) applies to an employer if:* the employer and employees of the employer that will be covered by the proposed agreement, are covered by an enterprise agreement that has not passed its nominal expiry date at the time the Commission will make the single interest employer authorisation, or
* the employer and an employee organisation entitled to represent the industrial interests of employees who will be covered by the proposed agreement, have agreed in writing to bargain for a proposed single-enterprise agreement that would cover those employees or substantially the same group of employees.
 |

[ ]  Yes

[ ]  No

## 5. Further requirements for a single interest employer authorisation

**5.1** **Are at least some of the employees who will be covered by the proposed multi-enterprise agreement represented by an employee organisation?**

[ ]  Yes

[ ]  No

If you answered **Yes**—Provide the name of one such employee organisation and identify the employees who will be covered by the proposed agreement who are represented by that organisation:

|  |
| --- |
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**5.2** **Will the proposed multi-enterprise agreement cover employees in relation to general building and construction work?**

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | See section 249A of the Fair Work Act 2009.*General building and construction work* is defined in section 23B of the Act. |

[ ]  Yes

[ ]  No

**5.3 Do the employers that will be covered by the proposed multi-enterprise agreement carry on similar business activities under the same franchise, as:**

* **franchisees of the same franchisor**
* **related bodies corporate of the same franchisor, or**
* **any combination of the above?**

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | See section 249(2) of the Fair Work Act 2009. |

[ ]  Yes—Insert the details requested and see note below.

[ ]  No—Answer questions 5.4–5.7

Note: If you answered **Yes**—Provide details of the franchisor and the relationship of each employer to the franchisor here and then go to the signature section signature (unless you also rely on s 249(3) and need to answer question 5.4).

|  |
| --- |
|  |

**5.4 Explain why all of the employers that will be covered by the proposed multi-enterprise agreement have clearly identifiable common interests.**

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | See section 249(3)(a) of the Fair Work Act 2009. Section 249(3A) gives as examples of matters that may be relevant to determining whether the employers have a common interest:* geographical location
* regulatory regime, and
* the nature of the enterprises to which the proposed agreement will relate, and the terms and conditions of employment in those enterprises.

Also see question 5.7. |

|  |
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**5.5 Explain why it is not contrary to the public interest to make the single interest employer authorisation.**

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | See section 249(3)(b) of the Fair Work Act 2009. Also see question 5.7. |
|  |

### 5.6 Explain why the operations and business activities of each employer that will be covered by the proposed multi-enterprise agreement, are reasonably comparable with those of the other employers that will be covered by the proposed agreement.

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | See section 249(1)(b)(vi) of the Fair Work Act 2009. Also see question 5.7. |

|  |
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|  |

**5.7 If the Applicant is a bargaining representative of an employee who will be covered by the proposed multi-enterprise agreement, do any of the employers that will be covered by the proposed agreement employ 50 or more employees at the time this application is made?**

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated with low confidence** | Sections 249(3AB) and 249(1AA) of the Fair Work Act 2009 provide that if:* this application is made by a bargaining representative of an employee who will be covered by the proposed agreement, and
* an employer that will be covered by the proposed agreement employs 50 or more employees at the time this application is made,

it is presumed the requirements respectively of sections 249(3)(a) and 249(3)(b), and section 249(1)(b)(vi), are met in relation to that employer, unless the contrary is proved.Section 249(3AC) of the Act specifies how the number of employees is calculated. |

[ ]  Yes

[ ]  No

If you answered **Yes**—Provide the name of each employer that employs 50 or more employees and the number of employees employed by those employers in each instance:

|  |
| --- |
|  |

## Authority to sign and signature

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated** | For ‘Authority to sign’:* If you are the Applicant—insert ‘Applicant’
* If you are an employee of a company or organisation that is the Applicant—insert your position title
* If you are the Applicant’s representative and have provided your details in this form—insert ‘Representative’.
 |
|   | **Authority to sign** |  |   |

|  |  |
| --- | --- |
| **A blue and black circle with a letter in it  Description automatically generated** | Insert your signature, name and the date.  If you are completing this form electronically and do not have an electronic signature, type your name in the signature field. |
| **Signature** |  |
| **Name** |  |
| **Date** |  |

|  |  |
| --- | --- |
|  |  |
| PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS |