

1) **IN THE STATUTORY COUNCIL FOR THE FAST FOOD, RESTAURANT
CATERING AND ALLIED TRADES**

2) IN THE MATTER BETWEEN

3) The Applicant

Full Names and Address

AND

The Respondent

APPLICATION FOR CONDONATION

1) I/We, the undersigned, hereby in terms of section **136 of the Labour Relations Act 66/95** as amended apply for Condonation of the late lodging of a referral for an Arbitration hearing.

2) Take notice that, the date on which the Conciliation meeting was held was on the _____

3) Take further notice that, the date on which the alleged dismissal, non-attendance of Arbitration proceedings, unfair Labour Practise is _____.

4) A copy of the Application for Condonation was sent to the Respondent by means of

- (1) Per Registered Post - [] - registered slip
(2) Per Hand - [] - signature of Respondent _____
(3) Per Telefax - [] - fax transmission slip

(Tick which ever is applicable)

5) Take further notice that the reason(s) for the late lodging of the referral is set in an affidavit marked as Annexure "A" hereto

Signed on this _____ day _____ 2011, at _____

1) _____
Signature of Applicant

1.1) _____
Name in full

2) _____
Signature of Applicant Representative

2.1) _____
Name in Full

To the Respondent _____

Full name and address

Per Telefax - - fax transmission slip attached.
Per Hand - - signature of Respondent _____
Per Registered Post - - registration slip
(Tick which ever is applicable)

And to: Bargaining Council for the Restaurant, Catering and Allied Trades
2nd – 8th Floors
Malborough House
Cnr Eloff & Fox
Johannesburg
2001

P.O. Box 30822
Braamfontein
2017
Tel No: 011 - 331-1016/7/8
Fax No: 011 – 331-1036
Per Hand - - signature of Respondent _____
Per Fax - - fax transmission slip
Per Registered Post - - registration slip

ANNEXURE "A"

1) I _____ am the Applicant Referring Party in the matter.

2) The reason for the late lodging of the referral is as follows:

2.1) Degree of lateness:

2.2) The reasons for lateness:

2.3) The prospects of succeeding with the matter:

2.4) Prejudice to the opposite party:

2.5) Additional information (Please describe)

2.6) The reason for not attending the proceedings (**complete only if applicable**)

Signed on this _____ day _____ 2011 at _____

1.1) _____
Applicant Signature

1.2) _____
Name in full

CERTIFICATE BY COMMISSIONER OF OATHS

- 1. I certify that before administering the oath/affirmation I asked the deponent the following questions and wrote down his/her answers in his/her presence:
 - a) Do you know and understand the contents of this declaration? Yes/No
 - b) Do you have any objection to taking the prescribed oath? Yes/No
 - c) Do you consider the prescribed affirmation to be binding on your conscience? Yes/No

- 2. I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration/affidavit which was sworn to/affirmed before me and the deponent's signature/thumb print/mark was placed thereon in my presence.

COMMISSIONER OF OATH

Full Name:

Business Address:

Designation: _____

Place: _____

Date: _____