

# APPLICATION FOR VESTING ORDER

Te Ture Whenua Māori Act 1993  
Section 164

For more information visit [www.justice.govt.nz/courts/maori-land-court](http://www.justice.govt.nz/courts/maori-land-court)

## WHAT IS THIS FORM FOR?

Use this form when transferring interests in Māori Land by sale or gift between owners in the same block, owners and their children or owners and any other member of the preferred class of alienee.

If you are not transferring shares to a member of the preferred class of alienee – you must seek Court confirmation of that transfer by completing form 25.

## HOW TO FILE AND COMPLETE THIS APPLICATION FORM

- (i) This form must be accompanied with the appropriate application fee and be filed with the Registrar in the District in which the land is located;
- (ii) Please ensure that all information required on the form is completed;
- (iii) Where tick boxes  are provided please ensure you tick all those boxes that apply to your application, unless you are required to select one box, then only select the box that applies;
- (iv) If there is insufficient room on the form to provide all the required information you should continue your application on a separate sheet of paper;
- (v) Additional information – in addition to completing this form, if the application requires you to provide further information you must include all documents, information or evidence you wish the Court to consider; and
- (vi) Comply with the requirements set out in the Checklist at the end of this form.

Office use:

Application: ACCEPTED / REFUSED

Dated: .....

Signed: .....

Name: .....

Designation: .....

**The Māori Land Court of New Zealand**

(please select the name of the Māori Land Court District in which some or all of the land is located)

Please select one District	<input type="checkbox"/> Taitokerau	<input type="checkbox"/> Waikato Maniapoto	<input type="checkbox"/> Waiariki
<input type="checkbox"/> Tairāwhiti	<input type="checkbox"/> Tākitimu	<input type="checkbox"/> Aotea	<input type="checkbox"/> Te Waipounamu

Block	Shares Held	Shares to be Vested

**APPLICATION:**

I .....  
 .....  
 .....  
 ..... (state full name),

make application for a vesting order transferring the land interests – (  tick as appropriate)

<input type="checkbox"/>	as set out in this application
<input type="checkbox"/>	according to the terms set out in the attached agreement

THE TRANSFEREES ARE:

Full Name
Address
Email

Full Name
Address
Email

Full Name
Address
Email

Full Name
Address
Email

Full Name
Address
Email

Full Name
Address
Email

Full Name
Address
Email

Full Name
Address
Email

Full Name
Address
Email

Full Name
Address
Email

NOTE: Where further blocks or transferees are involved continue on a separate sheet of paper or on Schedule 1 adapted as necessary. Where the transaction is a gift the Court may dispense with the signature of the transferee where it is satisfied that the transferee is aware of, and agrees with, the vesting. If there are a number of transferees indicate how the blocks or shares are to be allocated e.g equally or otherwise. Use a separate sheet of paper if necessary.

1. The transfer is to be:

by way of gift

by way of sale for the price of \$

2. Grounds for application:

I am a party to a contract or arrangement relating to the proposed transfer; or

I am the transferor/donor of the land or interest; or

I am a trustee for a person entitled to the land or interest

3. Consultation with whānau

I have consulted with my immediate whānau about this application; and

There are no objections from my whānau

4. Reason for sale/ gift .....

.....  
.....  
.....

5. Relationship of transferee(s) to transferor: .....

.....  
.....  
.....

Important Note: If an undivided interest in land i.e. shares in a block is being transferred, section 148 of the Act requires the transferee to be a member of the preferred classes of alienees which comprise –

- A child or remoter issue of the transferor.
- Whanaunga who are associated in accordance with tikanga Māori with the land.
- An owner in the land who is a member of the hapū associated with the land.
- A trustee of a person belonging to 1 to 3 above.
- A descendant of any former owner who is or was a member of the hapū associated with the land.

Whakapapa details (Schedule 2) must be completed and show how the transferee(s) qualifies as a member of the preferred classes of alienees.

6. I seek exemption from the requirements of section 158 to provide a special valuation:

YES (Please complete below)

NO

The alienation is by way of gift

The alienee is a close relative being my *(state relationship)*

Other (add to reasons or state other reasons) .....

.....

.....

.....

**PREFERRED PLACE OF HEARING:**

**SIGNATURE OF APPLICANT**

**Dated:**        /        /

**Witness:**

**(Signature)**

**Full name:**

**Occupation or qualification:**

**Address of Witness:**

### MĀORI LAND COURT CONTACT DETAILS

This application may be lodged with the Registrar at any office of the Māori Land Court.

<p><b>TAITOKERAU</b></p> <p>Level 1 16 Rathbone Street WHANGĀREI</p> <p>DX Box AX 10086 WHANGĀREI</p> <p>PH: (09) 983 9940 Fax: (09) 983 9941 mlctaitokerau@justice.govt.nz</p>	<p><b>TAITOKERAU</b></p> <p>Auckland Information Office Avanti Finance Building 65B Main Highway Ellerslie, AUCKLAND</p> <p>DX Box EX10912 AUCKLAND</p> <p>PH: (09) 279 5850 Fax: (09) 279 5852 mlctamakimakaurau@justice.govt.nz</p>	<p><b>WAIKATO MANIAPOTO</b></p> <p>L2, BNZ Centre 354-358 Victoria St HAMILTON</p> <p>DX Box GX10101 HAMILTON</p> <p>PH: (07) 957 7880 Fax: (07) 957 7881 mlcwaikato@justice.govt.nz</p>	<p><b>WAIARIKI</b></p> <p>Hauora House 1143 Haupapa St ROTORUA</p> <p>DX Box JX10529 ROTORUA</p> <p>PH: (07) 921 7402 Fax: (07) 921 7412 mlcwaiariki@justice.govt.nz</p>
<p><b>TAIRĀWHITI</b></p> <p>Ngā Wai e Rua Building Cnr Lowe Str &amp; Reads Quay GISBORNE</p> <p>DX Box PX10106 GISBORNE</p> <p>PH: (06) 869 0370 Fax: (06) 869 0371 mlctairawhiti@justice.govt.nz</p>	<p><b>TĀKITIMU</b></p> <p>Hastings District Court 106 Eastbourne Street West HASTINGS</p> <p>DX Box MX10024 HASTINGS</p> <p>PH: (06) 974 7630 Fax: (06) 974 7631 mlctakitimu@justice.govt.nz</p>	<p><b>AOTEA</b></p> <p>Ingestre Chambers 74 Ingestre Street WHANGANUI</p> <p>DX Box PX10207 WHANGANUI</p> <p>PH: (06) 349 0770 Fax: (06) 349 0771 mlcaotea@justice.govt.nz</p>	<p><b>TE WAIPOUNAMU</b></p> <p>Level 1 20 Lichfield Street CHRISTCHURCH</p> <p>DX Box WX11124 CHRISTCHURCH</p> <p>PH: (03) 962 4900 Fax: (03) 962 4901 mlctewaipounamu@justice.govt.nz</p>

**CONTACT DETAILS OF APPLICANT:**

Contact Address: .....

.....

.....

(Address to which documents or correspondence in connection with the application can be posted or delivered)

**PHONE NUMBER(S):**

Home: Work:

Mobile: Fax:

Email Address:

NOTE: Where fax or email addresses are given these may be used as a means of notice and service.

Fee: \$ 60.00

**NAME AND SIGNATURE OF TRANSFEREE(S)**

Full Name	Signature

# SCHEDULE 1 FURTHER PARTICULARS

	Number of shares to be transferred	Gift/Sale (State Amount)
Block(s)		
Name of Transferor <i>(shown on List of Owners)</i>		
Name of Transferee		
Relationship between Transferor/Transferee		
Block(s)		
Name of Transferor <i>(shown on List of Owners)</i>		
Name of Transferee		
Relationship between Transferor/Transferee		
Block(s)		
Name of Transferor <i>(shown on List of Owners)</i>		
Name of Transferee		
Relationship between Transferor/Transferee		
Block(s)		
Name of Transferor <i>(shown on List of Owners)</i>		
Name of Transferee		
Relationship between Transferor/Transferee		
Block(s)		
Name of Transferor <i>(shown on List of Owners)</i>		
Name of Transferee		
Relationship between Transferor/Transferee		

## SCHEDULE 2 WHAKAPAPA DETAILS

1. Full names of donor/transferor: .....

.....

2. Full names of donor's/transferor's Children:

a.	b.
c.	d.
e.	f.
g.	h.

3. Full names of donor's/transferor's parents (please state relationship): .....

.....

.....

.....

4. Full names of donor's/transferor's brothers and sisters: *(if any and specify whether full brother or sister, whether half brother or sister, whether any were adopted in or out of family, whether legally or as a whāngai)*

a.
b.
c.
d.
e.
f.
g.



5. Full name(s) of donee/transferee: .....

6. Full names of donee's/transferee's parents (please state relationship): .....

7. Blood relationship of donor/transferor and donee/transferee (*be specific*): .....

8. If not evident from above information, please explain how the donee(s) / transferee(s) qualify as members of the preferred classes of alienees: .....