

New Law Firm Registration Form

After January 1, 2018, a new law firm must be registered before it practises law and delivers legal services (see <u>subregulation 4.8.4</u>)

Firm Name:					
Anticipated Opening Date:					
Type of Firm:					
New Sole Law	yer Firm				
New Firm of T	New Firm of Two or More Lawyers				
Merger of Two	Merger of Two or More Existing Firms/Sole Practices				
Interjurisdiction	Interjurisdictional Firm (see <u>regulation 7.2</u>)				
Other (explain)					
1. Contact Information					
Mailing Address:					
City, Province, Postal Code:					
Civic Address:					
City, Province, Postal Code:					
Phone #:					
Fax #:					
Email:					
Website:					
Designated Lawver*					

^{*}The purpose of a law firm appointing a Designated Lawyer is to assign responsibility for fulfilling a defined list of regulatory obligations, under <u>subregulation 4.7.3</u>. In the case of a sole practice, the practising lawyer will be automatically designated.

۷.	rees		
Mem	pership fees are to be paid by:		
(a)	the firm through the Pre-authorized Payment Program (there is no need to fill out a Pre-authorized Payment Form)		
(b)	the firm by cash or cheque for the full amount		
(c)	individual lawyers		
3.	Law Firm Associations		
(a)	Lawyers associated* with the firm: (*Associated i.e. partner, associate)		
Name	e:		
Email:			
Asso	ciation:		
Name	a·		
Emai			
	ciation:		
Name	e:		
Emai	<u> </u>		
Asso	ciation:		
Name	e:		
Emai	: 		
Asso	ciation:		

(Attach a separate sheet if extra space is required)

(b)	Staff in the firm*:	firm who are not lawyers , who assist in or deliver legal services by the law
Nam	e:	
Ema	il:	
Posit	tion:	
Nam	e:	
Emai	il:	
Posit	tion:	
Nam	e:	
Ema	il:	
Posit	tion:	
Nam	e:	
Emai	il:	
Posit	tion:	
Nam		
Emai	il:	
Posit	tion:	
Nam	e.	
Emai		
Posit	tion:	

(Attach a separate sheet if extra space is required)

^{*}Note: This question prepares the NSBS for anticipated amendments to the Legal Profession Act that will allow more staff in law firms to deliver legal services. Please identify staff who have independent contact with clients and/or initiate or receive communications from clients such as paralegals or senior administrative assistants. Do not identify staff with only incidental or non-file related interactions with clients such as accounting or office support staff.

4.	Law Corporations*		
If applicable, identify all <u>law corporation(s)</u> associated with the new firm:			
(a)	Name of law corporation:		
	Has the law corporation been issued a permit? ☐ Yes ☐ No		
(b)	Name of law corporation:		
	Has the law corporation been issued a permit? ☐ Yes ☐ No		
(c)	Name of law corporation:		
	Has the law corporation been issued a permit? ☐ Yes ☐ No		
*Law Corporations are required to have a permit from the Society pursuant to <u>regulation 7.4</u> . (see <u>Law Corporation Procedures</u> and <u>Application Form</u>)			
5.	Limited Liability Partnership		
Is the firm a partnership that proposes to register as a limited liability partnership under the Nova Scotia <i>Partnerships and Business Names Registration Act</i> ?			
Yes	(see the <u>LLP Application Procedures</u> and Application Forms for <u>Provincial LLP</u> or <u>Extra-provincial LLP</u>)		
Nο	п		

6.	Trust Account Information			
The firm has reviewed <u>regulation 4.10</u> and advises that it will operate a general trust account.				
	☐ Yes	□ No		
If you	u answered "Y	es", please select one of the	following:	
	The following lawyer(s) of the new firm have obtained the Society's approval to operate a trust account under <u>regulation 4.10</u> :			
<u>or</u>				
7.	Trust Monies Undertaking (mandatory for all registrants)		for all registrants)	
Pursuant to regulation 4.8.5(g):				
l,			Designated Lawyer for	
			(law firm) undertake that the firm will not accept	
	trust money or trust property until one or more of its lawyers has received permission from the			
Socie	ety to operate	a trust account under <u>subrec</u>	julation 4.10.1.	
Sign	ature		Date	

8.	Designated Lawyer's Undertaking	
I,	made reasonable effort to confirm that the	(Designated Lawyer) confirm that I e information provided here is accurate.
Nam	e (Please Print)	Date
Sign	ature	
Firm	Name	