

CONFIDENTIAL

To The Law Society of Hong Kong

LEGAL VISITS BY SOLICITORS' EMPLOYEES Firm's name:

Firm's name: _____

TO PERSONS IN CUSTODY

Trainee Solicitors need not apply.

ATTACH:

- (A) PASSPORT SIZE PHOTO OF APPLICANT
(with name and HKID Card No. marked on the reverse)
- (B) COPY OF THE APPLICANT'S HKID CARD
- (C) CHEQUE PAYABLE TO THE LAW SOCIETY OF HONG KONG
- (D) AUTHORISATION SIGNED BY THE APPLICANT AND
WITNESSED BY THE SUPERVISING PARTNER / SOLICITOR
- (F) NOTIFICATION OF CHANGES TO A PRACTICE FORM
if not already submitted (see rule 5(2) of Solicitors' Practice Rules)

PART A : NEW APPLICATION *FEE PAYABLE HK\$120.00
(where applicant has not previously been authorised to carry out legal visits by any firm of solicitors)

Applicant

Full name of applicant:

HKID Card No:

Job title:

Supervising Solicitor

Full name of supervising solicitor:
(as on practising certificate) _____

No. of years of post-qualification experience in the litigation practice:

No. of authorised clerks under his supervision
(including the clerk named in the application):

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PART B : APPLICATION DUE TO CHANGE OF EMPLOYER *FEE PAYABLE HK\$120.00
(where applicant has previously been authorised to carry out legal visits by any firm of solicitors)

Applicant

Full name of applicant: _____

HKID Card No: _____

Job title: _____

Previous firm's name and dates of employment: _____

Supervising Solicitor

Full name of supervising solicitor: _____
(as on practising certificate)

No. of years of post-qualification experience in the litigation practice: _____

No. of authorised clerks under his supervision
(including the clerk named in the application): _____

PART C : APPLICATION ON CHANGE OF FIRM'S NAME *FEE PAYABLE HK\$600.00

New firm's name: _____

Old firm's name: _____

Please attach a schedule indicating names and HKID Card No. of applicants.

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AUTHORISATION

I hereby authorise the Commissioner of Police, or his representative, to release full particulars of any and all criminal convictions recorded against me to the Law Society of Hong Kong and my employer on whose behalf this application is submitted. I also agree to my fingerprint impressions being taken by the Police in connection with this application, if required for the purpose of verifying my criminal record. My personal particulars are as follows:-

Name
.....

Date of Birth
.....

HK Identity Card No. / Passport No.
.....

Chinese Commercial Code Nos. / / /
(as recorded on the applicant's
HK Identity Card - where applicable)

Place of Birth
.....

.....
(Signature of applicant)
date

Witnessed by
(Signature of Supervising Partner / Solicitor)

.....
(Name of Supervising Partner / Solicitor)

HKID Card No.
.....

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To The Law Society of Hong Kong

LEGAL VISITS BY SOLICITORS' EMPLOYEES

Firm's name: _____

TO PERSONS IN CUSTODY

Name of Supervising
Partner / Solicitor: _____

HKID Card No.: _____

Signature of Supervising
Partner / Solicitor

Date

PART A: DELETION DUE TO TERMINATION OF EMPLOYMENT

*NO FEE

If not already submitted, please attach a *Notification of Changes to a Practice Form* (see rule 5(2) of the
Solicitors' Practice Rules)

Name of approved clerk: _____

HKID Card No.: _____

Job title : _____

PART B : DELETION DUE TO OTHER REASON(S) *NO FEE

Name of approved clerk: _____

HKID Card No.: _____

Job title: _____

Reasons: _____