

# NORTHERN CAPE PROVINCIAL OFFICE

Postal and Physical Address: 219 Du Toitspan Road | Belgravia | Kimberley | 8301  
Tel: +27 (0) 53 0500508/9  
DOCEX: DX007 Kimberley  
E-mail: [infonc@lpc.org.za](mailto:infonc@lpc.org.za)

## NATIONAL OFFICE

Thornhill Office Park | Building 20 | 94 Bekker Road | Vorna Valley | Midrand | 1686  
Tel: +27 (0) 10 0018500



## CONVERSION

### FROM REFERRAL ATTORNEY TO ADVOCATE

APPLICATION IN TERMS OF RULE 30.2 AND RULE 30.4.3 SECTION 95(1)(X) READ WITH SECTION 32(1) (A) OF THE LEGAL PRACTICE ACT 28 OF 2014

#### A. PERSONAL PARTICULARS

1	Surname	
2	First Name	
3	Initials	
4	Date of Birth	
5	ID Number	
6	Residential address	
7	Are you in practice	

#### 8. If in practice

8.1	Main office physical address	
8.2	Postal address	
8.3	Mobile number	

8.4	Fax number	
8.5	Email	

9	Are you employed by a person who does not practice?	
<b>If yes,</b>		
9.1	Nature of employment	
9.2	Name of employer	
9.3	Business address of employer	
9.4	Postal address of employer	
9.5	Tel. number	

<b>10. If not in practice and about to commence practice</b>		
10.1	Business address	
10.2	Personal address	
10.3	Tel. number	
10.4	Email	

**The applicant must in a separate statement furnish the following information:**

- Every court in which he or she has been admitted and an indication that he or she has not been admitted in any other court.
- Provide a certificate signed by the registrar of every High court to which he or she applied for admission to practice, to the effect that no proceedings are pending or are contemplated to strike his or her name from the roll or to suspend him or her from practice.
- Indicate if he/she intends practicing as an advocate and whether he/she intends to practice with a trust account.
- Attach right of appearance certificate in the High Court, Supreme Court of Appeal and the Constitutional Court.
- Attach proof of specialized training in advocacy.
- Attach proof of admission as attorney.
- Attach proof of payment of the prescribed fee.

**Banking details:**

<b>Name</b>	<i>LPC Northern Cape</i>
<b>Bank</b>	<i>ABSA</i>
<b>Acc. No.</b>	<i>409 795 4090</i>
<b>Branch Code</b>	<i>632005</i>
<b>Reference</b>	<i>CONV Initials &amp; Surname</i>

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**SIGNATURE OF APPLICANT**

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**DATE**