REPUBLIC OF KENYA

DECLARATION TO ACCOMPANY APPLICATION FOR PRACTICING CERTIFICATE FOR THE YEAR 2017

(To be filled in duplicate)

I, _____

(Full names as entered on the Roll of Advocates)

hereby make application for a Practicing Certificate for the year **2017** practice year and declare as follows:

1. That my name is _____

(Full names as entered on the Roll of Advocates)

2. That my admission number is P.105/_____

3. That the nature of my engagement is as a _____

(sole proprietor, partner, associate, company secretary, legal officer, in-house lawyer, academic, state counsel, etc).

MUST be filled by sole proprietor only: That in case I am not in practice for whatever reason, all pending briefs in my law firm shall be managed and concluded by**: (Please tick one)**

☐ *Advocates firm (**not being a sole proprietorship**)*

*a) Name of Law Firm*_ _____

*b) Postal Address*_____

*c) Town/City*_____

OR

☐ *Advocates firm appointed by the Council of the Law Society of Kenya*

4. That my place of business is _____

(Full name of firm/business/employer)

5. That my contacts are:

*a) Name of building*_____

*b) Floor*_____

*c) Door No.*_____

*d) Street*_ _____

*e) Postal address*_____

*f) Code*_ _____

*g) City/Town*_____

*h) Telephone*_____

*i) Cell phone*_ _____

*j) Fax*_____

k) *Email*_____

6. That my National Identification Number is_____and/ or Passport Number is _____

7. That I am a life ☐ /Non -life ☐ member of the Advocates Benevolent Association (tick).
If a life member, please attach a copy of the life membership certificate.

8. That I have complied with The Advocates (Professional Indemnity) Regulations, 2004, and hereby attach a copy of (my/my firm's/ employer's) Professional Indemnity Cover.

9. That my name was entered on the Roll of Advocates on the_____day of_____in the year _____as being duly admitted.

10. That I wish to apply for the Advocates ID for the next five years starting 2017 and expiring on 2022. I have appended two colored passport photographs duly signed at the back by myself and processing fee of **KShs.1000/-**. If required tick✓ ☐

11. That I have complied ☐/ not complied ☐ with Continuing Professional Development (CPD) Regulations for the year ending 31st December 2016.
If No, give reasons_____

_____

12. That I have ☐ /do not have ☐ any outstanding Disciplinary Tribunal fines and/or costs.
If yes, state amount: Ksh_____

13. I forward my Accountant Certificate for sole proprietorship or partnership and confirm that I operate a Client's Account.

- That my sole proprietorship or partnership was registered on this_____day of_____ in the year_____under certificate number_____
(**MUST Attach Certificate of Registration/Incorporation**)

OR

- I forward my Statutory Declaration in compliance with the Advocates (Accountant's Certificate) Rules for the period ending 31st December 2016 and confirm that the Rules did not apply for me because I did not during this period practice on my own account, either alone or in partnership, nor did I hold or reserve client's money.

14. Categories of practice

From the list below please give a general indication of the type of practice you have by marking the **five (5) main areas only** in which you practice and the percentage of working time you spend on each of those areas.

Categories of Practice	Mark ✓	% of Working Time	Categories of Practice	Mark ✓	% of Working Time
Alternative Dispute Resolution (Arbitrator/Mediator)		__%	Construction & Engineering		__%
Legislative Drafting		__%	Commercial Law – General		__%
Banking, Finance & Securities Law		__%	Consumer Protection		%
			Constitutional and Human Rights Law		__%

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Categories of Practice	Mark ✓	% of Working Time	Categories of Practice	Mark ✓	% of Working Time
Personal Injuries & Insurance Law		__%	General Practice		__%
Intellectual Property Law		__%	**Other(s) (please specify)**		
Planning, Environment & Land Court		__%			
Pro bono Legal Services		__%			
Mining Law		__%			
Taxation and Revenue		__%			
Corporate Law		__%			
Criminal Law – General		__%			
Defamation and Media Law		__%			
Industrial Relations, Unions & Employment Law		__%			
Occupational & Environmental Health Law		__%			
Regional & International Law		__%			
Property, Conveyancing, Land Landlord & Tenant Law		__%			
Family Law & Succession		__%			

NB: ***Forms will not be accepted if not fully filled as appropriate***

Declared this_____day of_____in the year_____at _____

(Place where declared)

_____

Signature

Declared by me in the presence of

_____ _____

NAME Signature