C.—Form of application as to who is the employer of an employed person.	4. Names and addresses of other persons directly interested in settlement of question:—
APPLICATION TO THE MINISTER OF LABOUR FOR	
DETERMINATION OF A QUESTION UNDER SEC-	
TION 10 (1) (c).	5. Reasons for considering that there is a
1. Full name and address of applicant:—	doubt as to person who is the employer for the purposes of the Act:—

	l ·
2. Nature of Applicant's Interest in determination of question (whether interested as a Possible Employer or as Employee or otherwise);	The following questions to be answered if the case is one to which the Regulations made under Schedule IV (6) to the Unemployment Insurance Act, 1920 (Intermediate Employers)
3. Outline of question raised:—	are thought to apply (see note at back):—
	(a) Nature of premises on which work is performed
(1) Name and Address of	
(a) Immediate Employer, i.e., person by	***************************************
whom employed person is directly en-	
gaged.	(b) By whom are such premises owned,
***************************************	and whether they are leased to or occupied
	by any other person ?
(b) Any person, other than immediate employer, whom there may be grounds for	
thinking to be Employer for purposes of	(c) Who is responsible for observance of
the Unemployment Insurance Act.	the provisions of the Factory Act, Coal
***************************************	Mines Act, or any other Act applicable to
	the circumstances of the case?

Business or Occupation	
(2) Name and address of Employee.	DECLARATION.
(-)	I declare that the above particulars given
	with a view to the determination by the Min-
	ister of Labour under Section 10 (1) (c) of the Unemployment Insurance Act, 1920, of the
(3) Particulars of Employment:—	question whether (set out as briefly and as
(i) Who engages employee?	clearly as possible the question raised)
(ii) Who can (a) dismiss and (b) in what	***************************************
circumstances! (State in particular if per-	
son other than Immediate Employer has any	are to the best of my knowledge and belief
power of dismissal.)	correct.
(a)	(Signed) (Name)
(b)	(Address)
(iii.) Whether employment is a whole time employment.	••••••••••••
(iv.) (a) Amount of remuneration and (b)	(Date)
whether a fixed salary or by time, by piece,	
or commission or otherwise.	
(a)	Admiralty, 14th September, 1920.
(b)	R.M.
(v.) Who is liable to make the payment?	The undermentioned to be tempy. Hon.
(vi.) Nature of duties to be performed, and where performed.	Lieut., Unattached List, R.M.:—
(vii.) Who gives orders or directions?	Frank Stanley Kingston. 8th Sept. 1920.
(viii.) Extent of right of control during	
performance of duties by	
(a) Immediate Employer.	4.7 7. 15.7 0 . 7 . 1000
(b) Any other person. (ix.) Is the Immediate Employer employed	Admiralty, 15th September, 1920.
within the meaning of the Act by any other	R.M.A.
person. (If there is any doubt on this, a	Capt. Francis C. Willes to be seconded whilst
separate application should be made on	holding special appointment. 16th Aug.
$\mathbf{U}.\mathbf{I}.\mathbf{A}. \ 1 \ (\mathbf{a})$	1920. (Substituted for the notification in
(x.) Any further information that can be	the London Gazette dated 20th Aug. 1920, page 8629.)
given, including copies of the contract of ser-	
vice (if in writing), and of any documents bearing on above questons.	R.M.L.I.
(xi.) Has any decision been obtained from	Maj. Guy Harrison is tfd. to Supy. List, R.M.,
the Ministér of Health?	W./T. 1st Sept. 1920.

(xii.) By whom are Health contributions

paid?

Maj. Reginald D. H. Lough, O.B.E., is absorbed in Est. 1st Sept. 1920.