



CONFIRMATION OF SERVICE OF NOTICE OF APPLICATION COMMUNITY TREATMENT ORDER

Sections 51 and 52 Mental Health Act 2007

This form is to be provided to the Mental Health Review Tribunal Civil Registry with any application for a Community Treatment Order or as soon as possible after the application is made.

Mental Health Facility:	
Facility Address:	
Facility Telephone:	
Order Applicant Name:	

Section 52 of the *Mental Health Act 2007* requires the applicant for a Community Treatment Order (CTO) to notify the affected person in writing of the application. The notice must include a copy of the proposed treatment plan. For information on the required period of notice, please refer to [Practice Direction No.2 of 2023 - Community Treatment Orders](#) on the Mental Health Review Tribunal website.

Client

Client Name:			
Address:			
DOB:	MRN:	MHRT No:	

Service of Notice

Notice of the application, including a copy of the proposed treatment plan, was served on the above-named client on _____ by the following method:

Notification of Carers

Under s52(5) of the *Mental Health Act 2007*, all reasonably practicable steps must be taken to notify any designated carer or principal care provider in writing of the application .

Name of carer: _____ Date Notified: _____

Method of Notice: _____

Confirmation of Service

I confirm that I have served the notice of application, including a copy of the proposed treatment plan, on the affected person as set out above.

Signature: _____ Date: _____

Full Name: _____ Applicant Delegate

Position/Title: _____