Payment Schedule / Notice of Dispute must:	New South Wales	ACT	Victoria	Tasmania	South Australia	Queensland	Western Australia	Northern Territory
Identify the relevant payment claim	✓	✓	✓	✓	✓	✓	✓	✓
Indicate the amount (if any) the respondent proposes to pay	✓	✓	√	✓	√	✓		
If the scheduled amount is less than claimed amount, indicate why and give reasons for withholding payment.	✓	√	√	✓	√	\	✓	√
Identify any amount of the claim that the respondent alleges is an excluded amount;			√					
Include any other information prescribed / be in the prescribed form (if any)		✓	√			✓		
Be in writing						✓	✓	✓
Be addressed to the claimant and signed by the party giving notice							✓	✓
State the name of the party giving notice and the date of the notice							√	√
State the reasons for why the claim is not in accordance with the contract (if applicable)							✓	√