**WARRANT OF DETENTION**

[*SUPREME/DISTRICT/MAGISTRATES*] **Select one** COURT OF SOUTH AUSTRALIA

CRIMINAL JURISDICTION

**[*FULL NAME*]**

**Informant/R**

**v**

**[*FULL NAME*]**

**Defendant**

|  |  |
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| Defendant |  |
| **Full Name** |
| Address |  |
| **Street Address (including unit or level number and name of property if required)** |
|  |  |  |  |
| **City/town/suburb** | **State** | **Postcode** | **Country** |
|  |
| **Email address** |
| Date of Birth/Licence no |  |  |
| **Date of Birth** | **Driver’s Licence no (if any)** |
| Phone Details |  |  |
| **Type (eg. Home; work; mobile) – Number** | **Another number** |

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| **To: the Sheriff** **the Commissioner of Police for the State of South Australia and each member of the Police Force for the State** **the Minister for Health and Wellbeing** **the Chief Executive of the Department for Correctional Services****Recitals**1. By order dated [*date*] the Court determined that [*the*] [*Defendant*] [*number*] [*name*] be acquitted because of mental illness at the time of the offence in respect of count[*s*] [*number(s)*] on the Information dated [*date*] pursuant to Division 7 of the *Crimes Act 1914* (Cth).
2. The Defendant is to be detained
* in a hospital [*name of hospital*]
* in safe custody in a prison

for a term of [*no of years*] [*no of months*] [*no of days*]. **provision for multiple****Warrant**1. The Sheriff and the Commissioner of Police and members of the police force, are directed to take the Defendant to
* the hospital named above.
* a prison as defined above.
1. The Minister for Health and Wellbeing or the Chief Executive of the Department for Correctional Services (as applicable) is directed to receive and detain the Defendant for the period of time specified in this warrant at
* the hospital named above or such other place of detention as is ordered by the Attorney-General for the Commonwealth.
* a prison as defined above or such other place of detention as is ordered by the Attorney-General for the Commonwealth
1. Accompanying this warrant insofar as it is provided to the Chief Executive of the Department for Correctional Services and Minister for Health and Wellbeing is a copy of the Information(s) in respect of which the Defendant was acquitted.
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| **Authentication**…………………………………………Signature of Court Officer[*title and name*]Date warrant signed: [*date*] |