**ORIGINATING APPLICATION TO DISCHARGE OR VARYCONDITION OF RECOGNIZANCE ORDER**

**Crimes Act 1914 (Cth) s 20AA(1)**

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

CRIMINAL JURISDICTION

**[*FULL NAME*]**

**Applicant**

**v**

**[*FULL NAME*]**

**Respondent**

|  |  |  |  |  |  |
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| Applicant |  | | | | |
| Authorising individual  **If applicant ant is not an individual and not represented by a law firm/office** |  | | | | |
|  | | | | |
| Name of law firm/office  **If applicable** |  | | |  | |
| **Law firm/office** | | | **Responsible Solicitor** | |
| Address for service |  | | | | |
| **Street Address (including unit or level number and name of property if required)** | | | | |
|  |  |  | |  |
| **City/town/suburb** | **State** | **Postcode** | | **Country** |
|  | | | | |
| **Email address** | | | | |
| Phone Details |  | | | | |
| **Type (eg. home; work; mobile) – Number** | | | | |
| Applicant’s References |  | | |  | |
| **Reference number - optional** | | | **Instant loss of licence number - optional** | |

**Provision for multiple**

|  |  |  |  |  |  |
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| Respondent |  | | | | |
| **Full Name (including Also Known as)** | | | | |
| Address |  | | | | |
| **Street Address (including unit or level number and name of property if required)** | | | | |
|  |  |  | |  |
| **City/town/suburb** | **State** | **Postcode** | | **Country** |
|  | | | | |
| **Email address** | | | | |
| Phone Details |  | | |  | |
| **Type (eg. Home; work; mobile) – Number** | | | **Another number (optional)** | |

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| **Application details**  This Application is for:   * conditions of a [*Recognizance Order/Recognizance Release Order*] **select one**made in respect of the original Defendant[*full name*] (‘the Subject’) to be varied. * the discharge of an entire [*Recognizance Order/Recognizance Release Order*]made in respect of the original Defendant [*full name*] (‘the Subject’)*.*   The original [*Recognizance Order/Recognizance Release Order*] the subject of this application was made on [*date*] in case number [*enter case number*] by the [*enter name of court*] Court of South Australia.  This Application is made under section 20AA(1) of the *Crimes Act 1914* (Cth).  The Applicantseeks the following orders: | | |
|  |  | The following condition[*s*]of the [*Recognizance Order/Recognizance Release Order*]imposed by the Courtbe varied as follows:   * [*Enter details of variation for each condition*] |
|  |  | The [*Recognizance Order/Recognizance Release Order*] imposed by the Courtbe discharged. |
|  |  | [*Enter other*]. |
| This Application is made on the grounds   * set out in the accompanying Affidavit sworn by [*name*] on [*date*]. * that   **Enter grounds in numbered paragraphs**  **Only complete if applicable otherwise delete**  This Application is urgent on the grounds   * set out in the accompanying Affidavit sworn by[*name*] on[*date*]. * that   **Enter grounds in numbered paragraphs** | | |

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| **To the Other Parties: WARNING**  This Application will be considered at the hearing at the date and time set out at the top of this document.  If you wish to oppose the Application or make submissions about it:   * **you must go to the hearing** and * if you wish to rely on any facts in addition to or contrary to those relied on by the party seeking the orders you **must** file and serve on all parties an affidavit before the hearing date.   If you do not do so, the Court **may proceed in your absence** and orders may be made **finally determining** this application without further warning.  **To the Defendant the subject of the original** [*Recognizance Order/Recognizance Release Order*] **sought to be varied: WARNING**  You **must** go to the hearing or have a lawyer go for you to make submissions in [*support of/response to*] **select one** this Application.  If you are in custody, arrangements can be made for you to appear before the Court in person or via audiovisual link on the day of the hearing. You should inform the Court Registry whether you wish to appear in person or by audiovisual link. |

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| **Service**  The party filling this document is required to serve it on all other parties in line with the Rules of Court. |

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| **Accompanying Documents**  Accompanying this Application is a   * Supporting Affidavit **optional** * If other additional document(s) please list them below: |