To be inserted by Court				
Case Number:				
Date Filed:				
FDN:				
Hearing Date and Time:				
Hearing Location:				
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[SUPREME/DISTRICT/MAG CRIMINAL JURISDICTION	ISTRATES] Select one COU	URT OF SOUTH AUS	STRALIA	
[<i>FULL NAME</i>] Applicant				
v				
[<i>FULL NAME</i>] Respondent				
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 I	evel number and name of proper	ty if required)	
	City/town/suburb	State	Postcode	Country
		1	1	,
DI DI III	Email address			
Phone Details				
Applicant's References	Type (eg. home; work; mobile) – N	lumber		
	1		1	

Instant loss of licence number - optional

Reference number - optional

Address Full Name (Including Also Known se)	Provision for multiple							
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• • •								
This Application is urgent on the grounds	1							

To the Other Parties: WARNING

Enter grounds in numbered paragraphs

☐ that

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:

□ set out in the accompanying Affidavit sworn by [name] on [date].

- 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.

Service

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

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