**ORIGINATING APPLICATION FOR REVIEW, VARIATION OR REVOCATION OF PART 8A CRIMINAL LAW CONSOLIDATION ACT ORDER**

SUPREME / DISTRICT / MAGISTRATES **Circle one** COURT OF SOUTH AUSTRALIA

CRIMINAL JURISDICTION

CASE NO: …………………

……………………………………………………………………………… **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** |  | | | | |
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| 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)** | | | | |
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| **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)** | | | | |
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| **City/town/suburb** | **State** | **Postcode** | | **Country** |
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| **Email address** | | | | |
| Phone Details |  | | |  | |
| **Type (eg. Home; work; mobile) – Number** | | | **Another number (optional)** | |

**Only complete if applicable otherwise mark as N/A**

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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)** | | | | |
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| **City/town/suburb** | **State** | **Postcode** | | **Country** |
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| **Email address** | | | | |
| Phone Details |  | | |  | |
| **Type (eg. Home; work; mobile) – Number** | | | **Another number (optional)** | |

**Only complete if applicable otherwise mark as N/A**

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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** |
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| **Email address** | | | | |
| Phone Details |  | | |  | |
| **Type (eg. Home; work; mobile) – Number** | | | **Another number (optional)** | |

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| **Application details**  **Mark appropriate selection below with an ‘x’**  This Application is to  [ ] amend or vary the terms of a Part 8A Order made in respect of the original *Defendant/Youth* **Circle one**  ………………………………….……**full name (‘the Subject’)** where  [ ] the present order is an order for release on licence pursuant to Part 8A Division 3A  [ ] the present order is an order for supervision pursuant to Part 8A Division 4  [ ] revoke a Part 8A Division 3A Order and make the original *Defendant/Youth* **Circle one**  ………………………………….…… **full name (‘the Subject’)** liable to a Supervision Order under Part 8A Division 4  Subdivision 2  [ ] revoke a Part 8A Division 4 Supervision Order made in respect of the original *Defendant/Youth* **Circle one**  ………………………………….…… **full name (‘the Subject’)** and substitute in its place an amended order  [ ] commit the original *Defendant/Youth* **Circle one**  ………………………………….…… **full name (‘the Subject’)** to detention,  where  [ ] the present order is an order for release on licence pursuant to Part 8A Division 3A  [ ] the present order is an order for supervision pursuant to Part 8A Division 4  [ ] review a Part 8A Division 4 Order for supervision made in respect of the original *Defendant/Youth* **Circle one**  ………………………………….…… **full name (‘the Subject’)** pursuant to section 269U  The original Order the subject of this application was made on ………………..**date** in case number …………..**case number** by the …………………………….**name of court** Court of South Australia.  This Application is made under  [ ] section 269ND  [ ] section 269NDA  [ ] section 269P  [ ] section 269U  [ ] section 269UC  of the *Criminal Law Consolidation Act 1935.*  The Applicant seeks the following orders:  **Enter orders in numbered paragraphs**  ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………  This Application is made on the grounds  [ ] set out in the accompanying Affidavit sworn by ………………………………….. **full name** on ………………..**date**.  **Must complete if Application includes varying or revoking the conditions relating to firearms in s 96(2) of the *Sentencing Act 2017***  [ ] that  **Enter grounds in numbered paragraphs**  ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………  **Only complete if applicable otherwise mark as N/A**  This Application is urgent on the grounds  [ ] set out in the accompanying Affidavit sworn by………………………………….. **full name** on ………………..**date**.  **Must complete if Application includes varying or revoking the conditions relating to firearms in s 96(2) of the *Sentencing Act 2017***  [ ] 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 attend 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/Youth) the subject of the original order: select one WARNING**  You **must** attend the hearing or have a lawyer attend for you to make submissions in *support of / response to* **circle 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 filing this document is required to serve it on all other parties in accordance with the Rules of Court. |

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| **Accompanying Documents**  **Mark appropriate selection below with an ‘x’**  Accompanying this Application is a  [ ] Supporting Affidavit **optional unless involves firearms conditions**  [ ] If other additional document(s) please list them below:  ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |