**INTERLOCUTORY APPLICATION TO VARY OR REVOKE GUARANTEE OF BAIL**

**Bail Act 1985 s 7(4)**

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

CRIMINAL JURISDICTION

CASE NO: …………………………..

………………………………………………………………………………………………**Full Name**

**R / Informant Circle one**

**v**

………………………………………………………………………………………………**Full Name**

**Defendant / Youth Circle one**

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| **Lodging party** | Guarantor | | |  | |
|  | **Party title** | | | **Full Name of party** | |
| Name of law firm/office |  | | |  | |
| (If applicable) | **Law firm/office** | | | **Name of 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** | | | | |

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| **Application**  **Mark appropriate selection below with an ‘x’**  The Defendant/Youth …………………………………………**full name**  [ ] is charged with the offence(s) set out in the Information dated …………………………………..**date**  [ ] has been convicted of the offence(s) being count number(s)……………………………………..  in the Information dated………………………**date**  The Defendant/Youth was granted bail on………………………**date**  The Guarantor applies to the ……………………………...…………………………………………………….**name of Court**  at ………………………………………………………………………………………………………….………**Registry location**  to:  [ ] vary the terms of the Guarantee of Bail.  [ ] revoke the Guarantee of Bail.  The Court case number[*s*] for any other criminal matters the Defendant has before any Court are:   * …………………………. * …………………………. * …………………………. * ………………………….   **Grounds of Application**  **Mark appropriate selection below with an ‘x’**  This Application is made on the grounds  [ ] set out in the accompanying Affidavit sworn by …………………………….**name** on ……………………….**date**  [ ] that: **list below in separately numbered paragraph(s)**   1. ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |

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

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| **To Other Parties: WARNING**  **Next paragraph only relevant to Youth Court**  This Application will be considered at the hearing at the date and time set out at the top of this document.  **Next paragraph only relevant if not Youth Court**  This Application will be considered at a hearing to be convened by the Court. You will receive a notice of hearing with details of the location, date and time of the hearing.  If you wish to oppose the Application or make submissions about it**, you must go to the hearing**.  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. |

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