**WRITTEN GUILTY PLEA TO SUMMARY OFFENCE**

**Criminal Procedure Act 1921 s 57A**

[*MAGISTRATES/YOUTH/**ENVIRONMENT RESOURCES AND DEVELOPMENT*] **Select one** COURT OF SOUTH AUSTRALIA

CRIMINAL JURISDICTION

[***FULL NAME*]**

**Informant**

**v**

**[*FULL NAME*]**

**Defendant/Youth**

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| **Lodging party** |  |  |
|  | **Party title** | **Full Name of party** |
| Name of law firm/office |  |  |
| **If applicable** | **Law firm/office** | **Name of responsible solicitor** |
| Name of authorised officer |  |
| **If body corporate and no law firm/office** | **Full Name** |

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| **Guilty Plea**I plead guilty to[ ]  the charge on the Information dated [*date*].[ ]  all charges on the Information dated [*date*].[ ]  count[*s*] [*number/s]* **provision for multiple counts** on the Information dated [*date*] and believe that the prosecution is prepared to withdraw the balance of counts on my plea of guilty to these counts.The charge[*s*] to which I am pleading guilty [*is/are*] **Delete inapplicable** [*a summary offence/summary offences*] **Delete Inapplicable** not punishable by imprisonment or detention.I wish to say the following in relation to my plea of guilty:**Set out any facts you want the Court to consider in numbered paragraphs**…………………………………………Signature of [*Defendant/Youth*]…………………………………………Full name of [*Defendant*/*Youth*] before me ……………………………………………… Signature of attesting witness **witness must be a Justice of the Peace, Solicitor or Police Officer**………………………………………….Printed name and title of witness **stamp here if applicable** |

**Next box displayed if filed by a solicitor**

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| **Certification by legal practitioner mandatory if Defendant/Youth represented**I, [*name of individual solicitor/barrister*] certify that:1. I am a lawyer holding a current practising certificate under the *Legal Practitioners Act 1981*;
2. I am representing the [*name of Defendant/Youth*] in these proceedings.
3. The [*name of* *Defendant/Youth*] received legal advice in respect of this plea prior to signing this form.

…………………………………………Signature of legal practitioner…………………………………………Full name of legal Practitioner ………………………….Date |

**Only complete next box if guilty plea made by counsel**

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| **Guilty Plea**I, [*name of individual barrister/solicitor*] certify that:1. I am a lawyer holding a current practising certificate under the *Legal Practitioners Act 1981*.
2. I am acting for the Defendant in this proceeding.
3. I have the authority of the Defendant to plead guilty on their behalf to

[ ]  the charge on the Information dated [*date*].[ ]  all charges on the Information dated [*date*].[ ]  count[*s*] [*number/s]* **provision for multiple counts** on the Information dated [*date*] and believe that the prosecution is prepared to withdraw the balance of counts on my plea of guilty to these counts.1. The [*name of* *Defendant/Youth*] received legal advice in respect of this plea prior to this form being signed.

The charge[*s*] to which I am pleading guilty on behalf of the Defendant [*is/are*] **Delete inapplicable** [*a summary offence/summary offences*] **Delete Inapplicable** not punishable by imprisonment or detention.I wish to say the following in relation to the Defendant’s plea of guilty:**Set out any facts you want the Court to consider in numbered paragraphs**…………………………………………Signature of [*name of individual barrister/solicitor*]…………………………………………Full name of [*name of individual barrister/solicitor*] before me ……………………………………………… Signature of attesting witness **witness must be a Justice of the Peace, Solicitor or Police Officer**………………………………………….Printed name and title of witness **stamp here if applicable** |

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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. |