



INTERIM NON-ASSOCIATION ORDER and/or PLACE-RESTRICTION ORDER and SUMMONS

Magistrates Court of South Australia

www.courts.sa.gov.au

Criminal Procedure Act 1921

Section 80(2)

This document must be served on the defendant personally

AP Number						
Registry					File No	
Address	<i>Street</i>			<i>Telephone</i>		<i>Facsimile</i>
	<i>City/Town/Suburb</i>		<i>State</i>	<i>Postcode</i>	<i>Email Address</i>	

Applicant

Full Name						
Address	<i>Street</i>			<i>Telephone</i>		<i>Facsimile</i>
	<i>City/Town/Suburb</i>		<i>State</i>	<i>Postcode</i>	<i>Email Address</i>	
Rank and ID No.						

Defendant

Full Name					DOB	<i>dd/mm/yyyy</i>
Address	<i>Street</i>			<i>Telephone</i>		<i>Facsimile</i>
	<i>City/Town/Suburb</i>		<i>State</i>	<i>Postcode</i>	<i>Email Address</i>	

Date order made:

The Court has heard an application for a Non-Association order and/or a Place Restriction order (*strike out inapplicable*) in your absence.

In the 2 years immediately preceding the laying of the information you had been convicted of an indictable offence.

The Court is satisfied that it was reasonably necessary to make this order to ensure you do not commit any further indictable offences.

Details of Non-Association order:

The defendant must not:

be in the company of:

Name

Date of birth

Name

Date of birth

Name

Date of birth

communicate with:

Name

Date of birth

Name

Date of birth

Name

Date of birth

except during the following times or circumstances:

Details of Place-Restriction order:

The defendant must not:

 frequent or visit:

Address

Address

Address

 except during the following times or circumstances:

Hearing details	Registry		Date
	Address		Time am/pm
	Telephone	Facsimile	Email Address
..... Date	 MAGISTRATES COURT	

IMPORTANT NOTICE TO THE DEFENDANT

- **Non-compliance with the order renders you liable to a term of imprisonment not exceeding 6 months for a first offence and not exceeding 2 years for a subsequent offence.**
- If you do not appear, an order may be made in your absence.

AFFIDAVIT OF PROOF OF SERVICE

I, _____ of _____	
Occupation:	_____
MAKE OATH AND SAY that: I did on the _____ day of _____ 20____, between the hours of _____ and _____ duly serve the within named defendant _____ with this order and summons, by delivering a sealed copy thereof to him/her personally at (state the address) _____ in the State of South Australia or by _____ authorised by the Court.	
SWORN before me at on the _____ day of _____ 20____	_____
Signature (Person authorised to take Affidavits) (e.g. Justice of the Peace) SERVER