Form 108A

|  |  |  |
| --- | --- | --- |
|  | NON-ASSOCIATION ORDER / PLACE RESTRICTION ORDER AS VARIED**Magistrates Court of South Australia**[www.courts.sa.gov.au](http://www.courts.sa.gov.au) *Criminal Procedure Act 1921*Section 82 | Court UseDate Filed:Date Posted: |
|  |
| AP Number |       |
| Registry |       | File No |       |
| Address |       |       |       |
|  | *Street* | *Telephone* | *Facsimile* |
|  |       |       |       |       |
|  | *City/Town/Suburb* | *State* | *Postcode* | *Email Address* |
| **Applicant** |
| Full Name |       |
| Address |       |       |       |
|  | *Street* | *Telephone* | *Facsimile* |
|  |       |       |       |       |
|  | *City/Town/Suburb* | *State* | *Postcode* | *Email Address* |
| Rank and ID No. |       |
| **Defendant**  |
| Full Name |       | DOB  |       |
|  |  |  | *dd/mm/yyyy* |
| Address |       |       |       |
|  | *Street* | *Telephone* | *Facsimile* |
|  |       |       |       |       |
|  | *City/Town/Suburb* | *State* | *Postcode* | *Email Address* |
| **This application is in regards to:** [ ]  Non-association order made on file number:       dated:       is hereby: [ ]  Place restriction order made on file number:       dated:       is hereby:[ ]  varied [ ]  revokedOrder as varied: |
|   Date MAGISTRATES COURT |

**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       with this order, by delivering a sealed copy thereof to him/her personally at (state the address)       in the State of South Australia |
| SWORN before me at       on the       day of       20     Signature  (Person authorised to take Affidavits) (e.g. Justice of the Peace) |  SERVER |