

Section 82

Date Posted:

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>	
This application is in regards to:					
<input type="checkbox"/> Non-association order made on file number:			dated:		is hereby:
<input type="checkbox"/> Place restriction order made on file number:			dated:		is hereby:
<input type="checkbox"/> varied <input type="checkbox"/> revoked					
Order 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