



POLICE APPLICATION FOR INTERIM VARIATION OF FINAL INTERVENTION ORDER

Magistrates Court of South Australia

www.courts.sa.gov.au

Intervention Orders (Prevention of Abuse) Act 2009
Section 26A

Court Use

Date Filed:

| | | | | | | | |
|--|------------------|--|--------------|--------------|---------------|-------------------|------------|
| Registry | | | | | File No | | |
| Address | Street | | | Telephone | | Facsimile | |
| | City/Town/Suburb | | State | Postcode | Email Address | | |
| Details of Police Officer applying to vary the Intervention Order (state rank and number) | | | | | | | |
| Name | Surname | | | Given name/s | | AP Number | |
| Address | Street | | | Telephone | | Facsimile | |
| | City/Town/Suburb | | State | Postcode | Email Address | | |
| Details of Parties to the Originating Intervention Order (that is subject to this application) | | | | | | | |
| Applicant (Police applicant state rank and number) (where applicant is a protected person, provide name only) | | | | | | | |
| Name | Surname | | | Given name/s | | AP Number | |
| Address | Street | | | Telephone | | Facsimile | |
| | City/Town/Suburb | | State | Postcode | Email Address | | |
| Defendant | | | | | | | |
| Name | Surname | | | Given name/s | | DOB dd/mm/yyyy | |
| Address | Street | | | Telephone | | Facsimile | |
| | City/Town/Suburb | | State | Postcode | Email Address | | |
| Protected Person(s) (provide contact details on Annexure attached) | | | | | | | |
| Names | Surname | | Given name/s | | Gender | DOB | dd/mm/yyyy |
| | Surname | | Given name/s | | Gender | DOB | dd/mm/yyyy |
| | Surname | | Given name/s | | Gender | DOB | dd/mm/yyyy |
| | Surname | | Given name/s | | Gender | DOB | dd/mm/yyyy |

Details of the Final Order to be Varied (that is subject to this application):

State of Issue:

Order Reference No.:

Date of Order:

Court of Issue:

Has the order been served upon or otherwise properly notified to the defendant? Yes No

Is the Order a Nationally Recognised Domestic Violence Order? Yes No

Details of variation sought:

A related problem gambling order will need to be varied

You must provide details of the following:

Are you aware of any relevant orders or pending applications under the *Family Law Act 1975* (Cth), between a protected person or persons proposed to be protected by the order and the defendant?

Yes No

Are you aware of any relevant orders, agreements, pending applications or contact determinations under the *Children and Young People (Safety) Act 2017*?

Yes No

Are you aware of any relevant orders or agreements for the division of property under the *Family Law Act 1975* (Cth) or the *Domestic Partners Property Act 1996*, or a corresponding law of another jurisdiction between a protected person or persons proposed to be protected by the order and the defendant, or any pending application for such an order?

Yes No

Are you aware of any other legal proceedings between a protected person or persons proposed to be protected by the order and the defendant?

Yes No

If you answered 'yes' to any of the questions above, you must provide a copy or details of the order, agreement, pending application, contact determination or proceedings.

The following documents must be attached to this application:

- A copy of the Order to be varied subject to this application.
- An affidavit outlining the grounds on which this application is sought.

.....
Date

.....
APPLICANT

| | | |
|------------------------|-----------|---|
| Hearing details | Registry | Date |
| | Address | Time am/pm |
| | Telephone | Facsimile |

.....
Date

.....
JUSTICE OF THE PEACE / REGISTRAR



**FORM 31AB ANNEXURE
PROTECTED PERSON(S) DETAILS
(INTERVENTION ORDER)**

Magistrates Court of South Australia

www.courts.sa.gov.au

Intervention Orders (Prevention of Abuse) Act 2009

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This annexure should be kept separately from Form 31AB. It must **NOT** be served on the defendant with Form 31AB. Pursuant to r 18.08B it must be stored electronically, separately from the hard file and any hardcopy of the document must be subsequently destroyed.

Protected Person(s) Details

| | | | | | | |
|----|---|------------------|-------|--------------|---------------|--------|
| 1. | Name | Surname | | Given name/s | | Gender |
| | Address | Street | | Telephone | Facsimile | |
| | | City/Town/Suburb | State | Postcode | Email Address | |
| | Preferred method of contact: <input type="checkbox"/> Post <input type="checkbox"/> Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email | | | | | |
| 2. | Name | Surname | | Given name/s | | Gender |
| | Address | Street | | Telephone | Facsimile | |
| | | City/Town/Suburb | State | Postcode | Email Address | |
| | Preferred method of contact: <input type="checkbox"/> Post <input type="checkbox"/> Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email | | | | | |
| 3. | Name | Surname | | Given name/s | | Gender |
| | Address | Street | | Telephone | Facsimile | |
| | | City/Town/Suburb | State | Postcode | Email Address | |
| | Preferred method of contact: <input type="checkbox"/> Post <input type="checkbox"/> Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email | | | | | |
| 4. | Name | Surname | | Given name/s | | Gender |
| | Address | Street | | Telephone | Facsimile | |
| | | City/Town/Suburb | State | Postcode | Email Address | |
| | Preferred method of contact: <input type="checkbox"/> Post <input type="checkbox"/> Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email | | | | | |
| 5. | Name | Surname | | Given name/s | | Gender |
| | Address | Street | | Telephone | Facsimile | |
| | | City/Town/Suburb | State | Postcode | Email Address | |
| | Preferred method of contact: <input type="checkbox"/> Post <input type="checkbox"/> Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email | | | | | |
| 6. | Name | Surname | | Given name/s | | Gender |
| | Address | Street | | Telephone | Facsimile | |
| | | City/Town/Suburb | State | Postcode | Email Address | |
| | Preferred method of contact: <input type="checkbox"/> Post <input type="checkbox"/> Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email | | | | | |