



APPLICATION TO VARY OR REVOKE RESTRAINING ORDER

Magistrates Court of South Australia

www.courts.sa.gov.au

Criminal Procedure Act 1921

Section 99F

Court Use

Date Filed:

| | | | | | |
|--|------------------|-------|--------------------|---------------|--|
| Registry | | | | File No | |
| Address | Street | | Telephone | | Facsimile |
| | City/Town/Suburb | State | Postcode | Email Address | |
| Defendant | | | | | |
| Name | Surname | | Given name/s | | DOB dd/mm/yyyy |
| Address | Street | | Telephone | | |
| | City/Town/Suburb | State | Postcode | Email Address | |
| Applicant | | | | | |
| Name | Surname | | Given name/s | | Applicant's reference / relationship to child |
| Rank | | | ID No | | |
| Address | Street | | | | |
| | City/Town/Suburb | State | Postcode | Email Address | |
| Application made by: | | | | | |
| <input type="checkbox"/> Original Applicant; <input type="checkbox"/> Defendant; <input type="checkbox"/> Person for whose benefit the order was made; or <input type="checkbox"/> Parent or guardian of the child for whom the order was made. | | | | | |
| Details of current order which is sought to be varied or revoked: | | | | | |
| | | | | | |
| Variation sought: | | | | | |
| | | | | | |
| Date | | | APPLICANT | | |

(Details of the hearing are on the next page)

| | | | |
|---|-----------|----------------------------|---------------|
| Hearing details | Registry | | Date |
| | Address | | Time am/pm |
| | Telephone | Facsimile | Email Address |
| Date | | MAGISTRATES COURT | |
| IMPORTANT NOTICES TO THE DEFENDANT AND APPLICANT | | | |
| <ul style="list-style-type: none"> • You must obtain leave from the Court before making this application. To do this you must show that there has been a substantial change in the relevant circumstances since the order was made or last varied. • You must also file an affidavit setting out details of the change. • If you do not appear an order may be made in your absence. | | | |

Proof of Service

Name of person serving:

Address of person serving:

Name of person served:

Address at which service effected:

Date service effected:

Time of day: Between am/pm and am/pm

Method of service (tick box)

 by post; any other method permitted by the Rules – specify:

I certify that I served the attached document in the manner described.

Certified this day of 20