Form 42

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|  | | NOTICE OF REGISTRATION OF  FOREIGN INTERVENTION ORDER  **Magistrates Court of South Australia**  [www.courts.sa.gov.au](http://www.courts.sa.gov.au)  *Intervention Orders (Prevention of Abuse) Act 2009*  Section 30 | | | | | | | |
|  | | | | | | | | | |
| **NATIONALLY RECOGNISED DOMESTIC VIOLENCE ORDER** | | | | | | | | | |
| Registry |  | | | | | | File No |  | |
| Address |  | | | | |  | | |  |
|  | *Street* | | | | | *Telephone* | | | *Facsimile* |
|  |  | |  | |  | |  | | |
|  | *City/Town/Suburb* | | *State* | | *Postcode* | | *Email Address* | | |
| **Defendant** | | | | | | | | | |
| Name |  | | |  | | | | | DOB |
|  | *Surname* | | | *Given name/s* | | | | | *dd/mm/yyyy* |
| **Date foreign order registered:**  A certified copy of the foreign order that has been registered is attached.  That order has been adapted for application in this State, and now restrains you in the following terms: | | | | | | | | | |
| That order is a registered Foreign Intervention Order for the purposes of Part 3A of the *Intervention Orders (Prevention of Abuse) Act 2009* and a recognised Domestic Violence Order under that Part.  Yes  No | | | | | | | | | |
| This document and the attached registered Foreign Order is required by the Court to be served on the defendant personally:  Yes (see over page for proof of service details)  Foreign Order comes into force against defendant upon service  No  Foreign Order comes into force against defendant as of date Foreign Order registered | | | | | | | | | |
| Date MAGISTRATES COURT | | | | | | | | | |
| **IMPORTANT NOTICES TO THE DEFENDANT**   * **Non-compliance with the order may render you liable to a term of imprisonment.** * If this is a Nationally Recognised Domestic Violence Order it applies and is enforceable in all Australian States and Territories. * If this is not a Nationally Recognised Domestic Violence Order, this order is enforceable in South Australia upon registration (and service if required). | | | | | | | | | |

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| **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 |
| I certify that I served the attached document on the defendant personally. |
| Certified this       day of       20 |