



**APPLICATION FOR A CONTROL ORDER**  
**Magistrates Court of South Australia**  
[www.courts.sa.gov.au](http://www.courts.sa.gov.au)  
**Child Sex Offenders Registration Act 2006**  
 Section 66JA(1)

**Court Use**

Date Filed:  
 Date Posted:  
 Service on Commissioner of  
 Police:

AP Number					
Registry				File No	
Address	Street		Telephone		Facsimile
	City/Town/Suburb	State	Postcode	Email Address	
<b>Applicant</b>					
Full Name					
Address	Street		Telephone		Facsimile
	City/Town/Suburb	State	Postcode	Email Address	
Rank and ID No.					
<b>Registrable Offender</b>					
Full Name				DOB	dd/mm/yyyy
Address	Street		Telephone		Facsimile
	City/Town/Suburb	State	Postcode	Email Address	
<b>Grounds of Application:</b>					
I make an application for a control order on the basis that					
<b>Details of order applied for:</b>					
.....			.....		
Date			THE COMMISSIONER OF POLICE		
<b>Hearing details</b>	Registry			Date	
	Address			Time am/pm	
	Telephone	Facsimile	Email Address		
<b>IMPORTANT NOTICE TO REGISTRAR</b>					
A copy of this application must be served on the Commissioner of Police.					
<b>IMPORTANT NOTICE TO THE COMMISSIONER OF POLICE</b>					
The Commissioner of Police must serve this application on the registrable offender personally.					
<b>IMPORTANT NOTICE TO THE REGISTRABLE OFFENDER</b>					
If you do not attend on the hearing date, or any adjourned hearing date, orders may be made in your absence.					

# 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 application, 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