Form 79

|  |  |
| --- | --- |
|  | **APPLICATION FOR REVIEW OF LICENCE DISQUALIFICATION/SUSPENSION****Magistrates Court of South Australia**www.courts.sa.gov.au*Road Traffic Act 1961 - Section 47IAB* |
| Registry at which Application is made ............................................................. | File No ............................................ |
|  |
| **Party details** |
| **Applicant** |
| Name:..................................................... , ............................................. DOB.................................. surname given name dd/mmm/yy |
| Address ..................................................................................................... .................................. street licence number .................................................................................................. ……………. ………….. city/town/suburb state postcode telephone mobile |
| **Respondent** |
| Name South Australian Police, .......................................... ……………………….. Disqualification Notice Number Brief number |
| Address ………………………………………………………….. |
|  |
| On the ……….. day of ……………… 20…, a member of the South Australian Police issued and handed a Notice of Disqualification/Suspension pursuant to Section 47IAA of the Road Traffic Act 1961, commencing on ………/……../……… to me. *(copy of notice attached)*I apply to the Magistrates Court for the following order: That I am not Disqualified/Suspended as there is a reasonable prospect that I would be acquitted of the offence. (S 47IAB(2)(a) RTA)  That the Disqualification/Suspension be reduced as the offence is a first offence and was trifling. (S 47IAB(2)(b)(i) RTA) That the Disqualification/Suspension be reduced as there is a reasonable prospect that I would be acquitted of a Category 3 offence but may be guilty of a Category 2 offence. (S 47IAB(2)(b)(ii) RTA)The grounds for the application and the evidence that will be relied upon are: *(copies of documents attached)* Blood Test – Blood taken at ………. am/pm on the …. day of 200…. Blood Test Result: ……% Opinion of Doctor …………………………..*(Doctors Name)* dated …… day of ………. 20…. Other :- give details**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**I have not received a summons charging me with any offence which relates to the notice of disqualification/suspension served on meI have/have not also received a notice from the Registrar of Motor Vehicles containing particulars of my licence disqualification/suspension. |
| ..........................................................................................Applicant’s signatureI understand that if I drive whilst disqualified/suspended I may be imprisoned.(S 91(5) MVA) |
|  |
| **Hearing date** | Registry..................................................... | Date.................................... |
|  | Address..................................................... | Time .................................am/pm |
| ....................................... ................................................. ........................................ telephone facsimile e-mail address |
| .............................. date | . . . . . . . . . . . . . . . . . . . . . . . . . . . MAGISTRATES COURTRegistrar/Justice of the Peace |