Form 11

## CIVIL PENALTY CONTRAVENTION APPLICATION

Magistrates Court of South Australia (Civil Division)

www.courts.sa.gov.au Fair Trading Act 1987 Section 86B Court Use

Date Filed:

Date Posted:

Trial Court							Action No			
Address	Street				Teleph	one	Facsimile	DX		
	City/Town/Suburb	State	State Postcod		e Email Address					
Commissioner for Consumer Affairs										
Address	evel 3, 91 – 97 Grenfell Street treet				131 882         8204 9697         225           Telephone         Facsimile         DX					
	Adelaide City/Town/Suburb		SA 5000 State Postcode			<mark>http://w</mark> Website	tp://www.cbs.sa.gov.au/consumeradvice/contact.html ebsite			
Defendant										
Full Name										
Address	Street					Teleph	one	Facsimile	DX	
(Registered Office, if Body Corporate)	City/Town/Suburb	Town/Suburb State Pc			Postcode		Email Address			
Solicitor (name)										
Industry Code the defendant contravened (code and section): Date of civil penalty contravention: Particulars of contravention:										
	Date						COMMISSIONER			
Hearing deta	Registry				Date					
	nils Address						Time	1	am/pm	
	Telephone     Facsimile     Email Address									
I certify that I h	ave served a copy of the a	application	on the c	defen	dant at t	the add	dress shown	above.		
	Date					REGISTRAR				