Form 15

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| STRATA TITLE OR COMMUNITY TITLE APPLICATION  **Magistrates Court of South Australia (Civil Division)**  [www.courts.sa.gov.au](http://www.courts.sa.gov.au) | | | | | | | | | | | Court Use  Date Filed:  Date Posted: | |
|  | | | | | | | | | | | | |
| Trial Court |  | | | | | | | Action No | |  | | |
| Address |  | | | | | |  | | |  | |  |
|  | *Street* | | | | | | *Telephone* | | | *Facsimile* | | *DX* |
|  |  | | |  | |  | |  | | | | |
|  | *City/Town/Suburb* | | | *State* | | *Postcode* | | *Email Address* | | | | |
| Amount claimed (if any) | | | $ | | | |
| Court Fee on filing | | | $ | | | |
| Service and Other Fee | | | $ | | | |
| Solicitor’s Fee | | | $ | | | |
| TOTAL CLAIMED | | | $ | | | |
| **Applicant/s** | | | | | | | | | | | | |
| Full Name |  | | | | | | | | | | | |
| Address  *(Registered Office, if Body Corporate)* |  | | | | | |  | | |  | |  |
|  | *Street* | | | | | | *Telephone* | | | *Facsimile* | | *DX* |
|  |  | | |  | |  | |  | | | | |
|  | *City/Town/Suburb* | | | *State* | | *Postcode* | | *Email Address* | | | | |
| Solicitor for Applicant/s (name) | | |  | | | | | | | | | | |
| Address |  | | | | | |  | | |  | |  |
|  | *Street* | | | | | | *Telephone* | | | *Facsimile* | | *DX* |
|  |  | | |  | |  | |  | | | | |
|  | *City/Town/Suburb* | | | *State* | | *Postcode* | | *Email Address* | | | | |
| **Respondent/s** | | | | | | | | | | | | |
| Full Name |  | | | | | | | | | | | |
| Address  *(Registered Office, if Body Corporate)* |  | | | | | |  | | |  | |  |
|  | *Street* | | | | | | *Telephone* | | | *Facsimile* | | *DX* |
|  |  | | |  | |  | |  | | | | |
|  | *City/Town/Suburb* | | | *State* | | *Postcode* | | *Email Address* | | | | |
| Solicitor for Respondent/s (name) | | |  | | | | | | | | | |
| Address |  | | | | | |  | | |  | |  |
|  | *Street* | | | | | | *Telephone* | | | *Facsimile* | | *DX* |
|  |  | | |  | |  | |  | | | | |
|  | *City/Town/Suburb* | | | *State* | | *Postcode* | | *Email Address* | | | | |
| **Details of application**  This application is made pursuant to section       of the  *Strata Titles Act 1988* or  *Community Titles Act 1996*   1. Correct name of the relevant Strata or Community Corporation: | | | | | | | | | | | | |
| 1. State the matter complained of: | | | | | | | | | | | | |
| 3. State the remedy sought: | | | | | | | | | | | | |
| Date APPLICANT | | | | | | | | | | | | |
| I certify that I have served a copy of the application on the Respondent/s at the address shown above. | | | | | | | | | | | | |
| Date REGISTRAR | | | | | | | | | | | | |