Form 6	50Y
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	APPLICATION TO RELEASE A SEIZED AND CLAMPED OR IMPOUNDED VEHICLE Youth Court of South Australia www.courts.sa.gov.au Fines and Debt Recovery Act 2017 Section 42(6)				Court Use Date Filed: Date Posted: Service on FERO:		
Registry	File No						
Address	Street			City/Town/Suburb		State	Postcode
	Telephone	Facsimile		Email Address		DX	
Applicant						1	
Full Name						DOB	
Address	Street	Street		City/Town/Suburb		State	Postcode
Address	Telephone						
Debtor	Тејерноне	Facsimile		Email Address			
Full Name						DOB	
Address	Street			City/Town/Suburb		State	Postcode
, luci e e e	Telephone Facsimile			Email Address			
Interested		party please attach further partie	culars)				
I advise the o	court that at the time	of making this application	, the foll	owing person has an	interest in	n this vehicle.	
Full Name							
Address	Street			City/Town/Suburb		State	Postcode
Address	Telephone Facsimile Em		Email Address				
Nature of inte	erest						
Registered	Owner						
I advise the o	court that at the time	of making this application	, the foll	owing person is the r	egistered	owner of this	vehicle.
Full Name							
Address	Street			City/Town/Suburb		State	Postcode
	Telephone Facsimile		Email Address				
Description	n of Vehicle						
		Mode					
				jistration No.			
Engine No.			Vehic	cle Identification No.			
Garaging ad	dress						

Grounds of Application I claim an interest in the above mentioned vehicle that has been seized and clamped or impounded.					
I make an applicatio	n for release of the a	bove mentioned vehicle.			
Please attach to this application the Written Determination of the Fines Enforcement and Recovery Officer to clamp or impound and any Notice of Disposal.					
Provide evidence of your interest in the vehicle and the grounds for release in an affidavit. Please attach the affidavit to this application.					
Date APPLICANT					
	Registry			Date	
Hearing details	Address			Time	am/pm
	Telephone	Facsimile	Email Ad	dress	
IMPORTANT NOTICE TO THE REGISTRAR A copy of this application and affidavit must be served on the Fines Enforcement and Recovery Officer within <u>one</u> <u>working day</u> . A copy must also be served on the debtor, interested party and registered owner (if the person is not the debtor or the applicant).					
IMPORTANT NOTICE TO ALL PARTIES If you wish to be heard on this application, you should attend court at the date and time stated above otherwise the court may hear and determine the matter in your absence.					
IMPORTANT NOTICE TO THE FINES ENFORCEMENT AND RECOVERY OFFICER					

The Fines Enforcement and Recovery Officer is required to notify the Registrar of any interested parties not already on the application.

Proof of Service (fill in	where required)				
Name of deponent:					
Address of deponent:					
Service on the Debtor					
Name of person served:					
Address at which service	e effected:				
Date service effected:					
Time of day: Between		am/pm and	а	ım/pm	
Service of application eff	ected: 🗌 per	sonally 🗌 pre	-paid post	🗌 email	
Service on the registered	d owner of the ve	nicle (if applicable)			
Name of person served:					
Address at which service	e effected:				
Date service effected:					
Time of day: Between		am/pm and	а	ım/pm	
Service of application eff	ected: 🗌 per	sonally 🗌 pre	-paid post	🗌 email	
Service on the interested party (if applicable)					
Name of person served:					
Address at which service effected:					
Date service effected:					
Time of day: Between		am/pm and	а	ım/pm	
Service of application eff	ected: 🗌 per	sonally 🗌 pre	-paid post	🗌 email	
I certify that I served a copy of the application and affidavit in support in the manner herein specified.					
Certified this	day of	20			