**ORIGINATING APPLICATION - FINES ENFORCEMENT - SEIZURE AND SALE OF ASSETS OPPOSITION AND RELEASE**

[*MAGISTRATES/YOUTH]* COURT OF SOUTH AUSTRALIA

SPECIAL STATUTORY JURISDICTION

**[*FULL NAME*]**

**Applicant**

**[*FULL NAME*]**

**Respondent**

**Duplicate panel if multiple Applicants**

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| Applicant |  | | | | |
| **Full Name** | | | | |
| Name of law firm/solicitor  **If any** |  | | |  | |
| **Law Firm** | | | **Responsible Solicitor** | |
| Address for service |  | | | | |
| **Street Address (including unit or level number and name of property if required)** | | | | |
|  |  |  | |  |
| **City/town/suburb** | **State** | **Postcode** | | **Country** |
|  | | | | |
| **Email address** | | | | |
| Phone Details |  | | |  | |
| **Type (eg. Home; work; mobile) – Number** | | | **Another number (optional)** | |

**Duplicate panel if multiple Respondents**

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| Respondent |  | | | | |
| **Full Name** | | | | |
| Address |  | | | | |
| **Street Address (including unit or level number and name of property if required)** | | | | |
|  |  |  | |  |
| **City/town/suburb** | **State** | **Postcode** | | **Country** |
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| **Email address** | | | | |
| Phone Details |  | | |  | |
| **Type (eg. Home; work; mobile) – Number** | | | **Another number (optional)** | |

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| **Application Details**  Matter type:[*Enter matter type*]  This Application is to:   * oppose the seizure and sale of the assets. **Select if** **section 36(15)** * release [*a seized and clamped/impounded*] vehicle. **Select if** **section 42(6)**   This Application is made under section [*36(15)/42(6)*] **select one** of the *Fines Enforcement and Debt Recovery Act 2017.*  The Applicant seeks the following orders:  **Orders sought in separately numbered paragraphs.**   * 1. **Enter if section 42(6) selected above otherwise delete** The vehicle specified in this Application be released to the Applicant. * 2. **optional if section 36(15) selected above** Exclude the property specified in this Application from the sale. * 3. **optional if section 36(15) selected above** Direct the Application of the proceeds of the property specified in this Application in the following manner: [*Enter* manner]. * 4. **provision for multiple** [*Enter* *any other orders*].   This Application is made on the grounds:   * set out in the accompanying Affidavit sworn by [*name*] on [*date*]. * that the property is not liable to [*seizure and sale*], **select one** as set out in the accompanying Affidavit. * that the Applicant has an interest in the vehicle that has been [*seized and clamped/impounded*] **select one** as set out in the accompanying Affidavit. * that the Applicant, not being the [*debtor/alleged offender*] **select one** has an interest in the property specified below seized, as set out in the accompanying Affidavit.   **Complete if applicable otherwise delete**  The Application is urgent because  **Enter grounds in separately numbered paragraphs where more than one** |

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| **Property subject of the order sought**  The property subject of the order sought is:   * (a) personal property (a vehicle). * (b) real property, namely Certificate of Title Register Book Volume [*Enter number*] Folio [*Enter number*], situated at [*Enter address*]. * (c) personal property (electronics/whitegoods) **select one**. * (d) personal property (other) [*Enter description*].   and was [*seized/seized and clamped/impounded*] on [*date*].   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Must complete if vehicle selected above**  Vehicle subject of the order sought | | | | | | | | Registration number: | [*Enter number*] | | | | | | | **Number** | | | | | | | Plate number: | [*Enter number*] | | | | | | | **Number** | | | | | | | Garaging address: | [*Enter street*] | | | | | | | **Street: include unit or level number and/or name of property if necessary** | | | | | | | [*Enter city/town/suburb*] | | [*Enter state*] | | | [*Enter postcode*] | | **City/town/suburb** | | **State** | | | **Postcode** | | Make of vehicle: **if known** | [*Enter make*] | | | | | | | **Make** | | | | | | | Model of vehicle: **if known** | [*Enter model*] | | | | | | | **Model** | | | | | | | Year of manufacture: **if known** | [*Enter year*] | | | | | | | **Year** | | | | | | | Engine number: **if known** | [*Enter engine number*] | | | | | | | **Engine** | | | | | | | Vehicle identification number:  **if known** | [*Enter number*] | | | | | | | **Number** | | | | | | | **mandatory if vehicle selected above**  Registered owner of the vehicle | | | | | | | | Full name: | [*Enter full name*] | | | | | | | **Full name** | | | | | | | Address: | [*Enter street address*] | | | | | | | **street: include unit or level number and/or name of property if necessary** | | | | | | | [*Enter city/town/suburb*] | [*Enter state*] | | | [*Enter postcode*] | | | **City/town/suburb** | **State** | | | **Postcode** | | | [*Enter Country*] | | | | | | | **Country:** | | | | | | | Email address: | [*Enter email address*] | | | | | | | **Email address** | | | | | | | Telephone: | [*Enter telephone number*] | | | [*Enter alternate phone number*] | | | | **Phone number** | | | **Alternative phone number** | | | | **Must complete if electronics selected above**  Electronics/whitegoods subject of the order sought | | | | | | | | Description: | [*Enter description*] | | | | | | | **Description** | | | | | | | Serial number: | [*Enter serial number*] | | | | | | | **Serial number** | | | | | | | Details of manufacture: | [*Enter brand*] | | | | | | | **Brand** | | | | | | | [*Enter model*] | | | | | | | **Model** | | | | | | | [*Enter year of manufacture*] | | | | | | | **Year of manufacture** | | | | | | |

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| **To the Other Parties: WARNING**  This Application will be considered at the hearing at the date and time set out at the top of this document.  If you wish to oppose the Application or make submissions about it:   * you must attend the hearing; and * you must file and serve on all parties a Response within 14 days of the service of the Application; and * if you wish to rely on any facts in addition to or contrary to those relied on by the party seeking the orders, you must file and serve on all parties an Affidavit within14 days after service of the Application.   If you do not do so, the Court may proceed in your absence and orders may be made **finally determining** this proceeding without further warning.  For instructions on how to file a response to an application and how to obtain access to the file, visit https://courtsa.courts.sa.gov.au/?g=node/482. |

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| **Service**  The party filing this document is required to serve it on all other parties in accordance with the Rules of Court. |

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| **Accompanying Documents**  Accompanying this Application is a:   * Multilingual Notice **mandatory** * Supporting Affidavit **mandatory** * Notice to Respondent Served Interstate **mandatory when address of party to be served is interstate** * Notice to Respondent Served in New Zealand **mandatory when address of party to be served is in NZ** * Notice to Respondent Served outside Australia **mandatory when address of party to be served is overseas & not in NZ** * If other additional document(s) please list below: |