Form 2e

To be inserted by Court	
Case Number:	
Date Filed:	
FDN:	
Hearing Date and Time:	
Hearing Location:	

ORIGINATING APPLICATION AND NOTICE

[SUPREME/DISTRICT/MAGISTRATES/YOUTH] Select one COURT OF SOUTH AUSTRALIA SPECIAL STATUTORY JURISDICTION

[FULL NAME] Applicant

[FULL NAME] Respondent

Applicant						
	Full Name					
Name of law firm/solicitor						
	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)			

Form 2e

Respondent							
	Full Name						
Address							
	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)				

Application and Notice Details

Matter type: [Enter matter type]

The Applicant gives notice of [Enter details].

This Application is for [enter details].

This Notice and Application is given and made [enter section and Act].

The Applicant seeks the following orders:

Orders sought in separately numbered paragraphs 1. [enter orders sought]

This Application is made on the grounds

- □ set out in the accompanying Affidavit sworn by [*name*] on [*date*].
- □ that
- grounds in separately numbered paragraphs 1.

Accompanying Documents

Accompanying this Application and Notice is a:

- □ Supporting Affidavit optional
- □ If other additional document(s) please list below: