**ORIGINATING APPLICATION EX PARTE - INTERVENTION ORDER ACT - DOMESTIC VIOLENCE ORDER NATIONALLY RECOGNISED**

*MAGISTRATES / YOUTH* **Circle one** COURT OF SOUTH AUSTRALIA

SPECIAL STATUTORY JURISDICTION

**……………………………………………………………………………………………………………Full name**

**Applicant**

|  |  |
| --- | --- |
| Applicant |  |
| **Full Name** |
| Name of responsible officer **If applicable** | **Full Name** |  |
| Responsible officer details **If applicable**  | **Rank/position** | **Number/identifier** |
| 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)** |

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| **Application Details****Mark appropriate sections below with an ‘x’**Matter type:………………………………………………………………..This Application is for an order declaring a Domestic Violence Order made against ………………………….**full name**(‘the Subject’) to be nationally recognised.This Application is made under section 29ZD of the *Intervention Orders (Prevention of Abuse) Act* 2009.The Applicant seeks the following orders:**Enter orders sought in separately numbered paragraphs**[ ] 1. An order declaring the Intervention Order to be a nationally recognised DVO.[ ] 2. ……………………………………………………………………………………………………………………….. …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….This Application is made on the grounds [ ] set out in the accompanying Affidavit sworn by sworn by ………………………..**name**on………………….**date**[ ] that **Enter grounds in separately numbered paragraphs**1. .………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. ..…….………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**Only complete if applicable otherwise mark as N/A**The Application is urgent because **Enter grounds in separately numbered paragraphs where more than one**1. .…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..
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| **Details of Order subject of this Application**State of issue: ………………………Order reference number: ………………………Court of issue: ………………………………………………Date order issued: ………………………Date order expires: ………………………The order subject of this Application is a final / interim **circle one** order.

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| **The Subject** |
| Name: | ………………………………………………  |
| **full name** |
| Address: | ……………………………………………………………………  |
| **street include unit or level number and/or name of property if necessary** |
| ……………………… |
| **city/town/suburb** |
| …………… | ………………………….. | ………….. |
| **state** | **Country** | **postcode** |
| Other address at which the Subject may be found **optional**: | ……………………………………………………………………… |
| **street include unit or level number and/or name of property if necessary** |
| ……………………… |
| **city/town/suburb** |
| …………….. | ……………………… | ………….. |
| **state** | **Country** | **postcode** |
| Telephone: | ……………………… |
| **phone no** |
| Date of birth: | ……………………… |
| **date of birth** |
| Drivers Licence number: | ……………………… |
| **licence number** |
| **Original Applicant for Domestic Violence Order subject to this Application** |
| Applicant: | ………………………………………………  |
| **full name** |
| Responsible officer: **if applicable** | ……………………………………………… |
| **full name** |
| Responsible officer details: **if applicable** | ……………………… | ……………………… |
| **rank**  | **number** |
| Address: | ……………………………………………… |
| **street: include unit or level number and/or name of property if necessary** |
| ……………………… |
| **city/town/suburb** |
| ………………… | ……………………… | ………….. |
| **state** | **Country** | **postcode** |
| Telephone: | ……………………………………………… |
| **phone no** |
| **Protected person** **[*1*]:** **Only complete if applicable otherwise mark as N/A** |
| Full name: | ……………………………………………… |
| **name** |
| Date of birth: | ……………………… |
| **date of birth** |
| Relationship to the subjectat the time the foreign order was made: | [ ] Partner/spouse[ ] Child[ ] Step-child[ ] Parent[ ] Step-parent[ ] Sibling[ ] Relative ……………………………………………… **details**[ ] Neighbour[ ] ………………………………………………**other** |
| **Protected person** **[2]:**  **Only complete if applicable otherwise mark as N/A** |
| Full name: | ……………………………………………… |
| **name** |
| Date of birth: | ……………………… |
| **date of birth** |
| Relationship to the subjectat the time the foreign order was made: | [ ] Partner/spouse[ ] Child[ ] Step-child[ ] Parent[ ] Step-parent[ ] Sibling[ ] Relative ……………………………………………… **details**[ ] Neighbour[ ] ………………………………………………**other** |
| **Protected person** **[3]:** **Only complete if applicable otherwise mark as N/A** |
| Full name: | ……………………………………………… |
| **name** |
| Date of birth: | ……………………… |
| **date of birth** |
| Relationship to the subjectat the time the foreign order was made: | [ ] Partner/spouse[ ] Child[ ] Step-child[ ] Parent[ ] Step-parent[ ] Sibling[ ] Relative ……………………………………………… **details**[ ] Neighbour[ ] ………………………………………………**other** |

**Service or notification of original order**Has the order been served upon or otherwise properly notified to theSubject?[ ] Yes[ ] No**Must complete if selected ‘yes’ above**Date order served on the Subject / properly notified of order: ……….………………….**date****Previous Declarations**Has the order been previously declared as a Nationally Recognised Domestic Violence Order in another Australian State or Territory?[ ] Yes[ ] No**Must complete if selected ‘yes’ above Details of previous declaration**

|  |  |
| --- | --- |
| State of issue: | ………………………………. |
| **state** |
| Order reference number: | ………………………………. |
| **number** |
| Court of issue: | ………………………………. |
| **Court** |
| Date order issued: | ………………………………. |
| **date** |
| Date order expires: | ………………………………. |
| **date** |

**Addressing a Domestic Violence Concern**Does the Domestic Violence Order clearly state it addresses a domestic violence concern?[ ] Yes[ ] No**Must complete if selected ‘no’ above** **Reasons the order should be declared as a Nationally Recognised Domestic Violence Order**………………………………. |

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| --- |
| **Accompanying Documents****Mark appropriate sections below with an ‘x’**Accompanying this Application is a:[ ] Supporting Affidavit **mandatory** [ ] Copy of Domestic Violence Order **mandatory** [ ] Copy of Certificate of Proper Notification of Domestic Violence Order [ ] If other additional document(s) please list below:.………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. |