**ORIGINATING APPLICATION EX PARTE – REGISTRATION FOREIGN ORDER**

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

SPECIAL STATUTORY JURISDICTION

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

**Applicant**

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| 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)** |
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| **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 to register a Foreign Intervention / Restraining / other **select one** Order.This Application is made under: ………………………………………………………………………………………………………………………………………………………………………………………………**Enter Act and section or other particular provision**[ ] **Must select** **if Intervention Order selected above** section 30 of the *Intervention Orders (Prevention of Abuse) Act* 2009.[ ] **Must select** **if Restraining Order selected above** section 99H of the *Criminal Procedure Act* 1921.[ ] …………………………………………………………………………………………………..**other**The Applicant seeks the following orders:1. The Registration of the Foreign I*ntervention / Restraining / other* **Circle one** Order described below, made under:

[ ] section [*5/16C*]**Circle one** of the *Child Protection (Offenders Prohibition Orders) Act* 2004(NSW).[ ] section 72 of the *Child Protection (Offender Reporting and Registration) Act* 2004(NT).[ ] section 66I of the *Sex Offenders Registration Act* 2004(Vic).[ ] section 13C of the *Child Protection (Offender Reporting and Offender Prohibition Order) Act* 2004 (Qld)*.*[ ] section 9 of the *Community Protection (Offender Reporting) Act* 2005(Tas).[ ] section [*15/18C*] **Circle one** of the *Crimes (Child Sex Offenders) Act* 2005(ACT).[ ] section [*19/90*]**Circle one** *Community Protection (Offender Reporting) Act* 2004 (WA).[ ] section 89 of the *Children’s and Young People’s Well-being Act* 1989 (NZ). [ ] …………………………………………………………………………………….**Enter other**[ ] 2. ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**other orders including any necessary adaptations or modifications to the order requested**This Application is made on the grounds [ ] set out in the accompanying Affidavit sworn by ………………………………………………..**name**on  ………………………………. **date**[ ] that **grounds in separately numbered paragraphs**……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**Only complete if applicable otherwise leave blank**The Application is urgent because **Enter grounds in separately numbered paragraphs where more than one**1. ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..
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| **Details of foreign order**

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| State of Issue | ……………………… |
| **State** |
| Order reference number | ……………………… |
| **number** |
| Court of issue | ……………………………………………… |
| **name of Court** |
| Date Foreign Order made | ……………………… |
| **date** |
| Date Foreign Order expires **If applicable** | ……………………… |
| **date** |
| Date Foreign Order served on the Subject | ……………………… |
| **date** |

**Subject to Foreign Restraining Order**

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| --- | --- |
| Subject | ……………………………………………… |
| **name** |
| Address | ……………………………………………………………………… |
| **Street: include unit or level number and/or name of property where necessary** |
| ……………….. | ………….. | ………… | ………………………….. |
| **city/town/suburb** | **state**  | **postcode** | **Country** |
| Email address **if known** | ……………………………………………… |
| **email address** |
| Telephone number **if known** | ……………………………………………… | ……………………………………………… |
| **phone number** | **alternative phone number** |
| Date of birth **if known**: | ……………………… |
| **date of birth** |

**Must complete if Intervention Order selected above, or Order for the protection/benefit of a particular person** [***Protected person/Person for whose benefit order was made***] **provision for multiple**

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| Full name  | ……………………………………………… |
| **name** |
| Date of birth  | ……………………… |
| **date of birth** |
| Relationship to the Respondent at the time the Foreign Order was made | [ ] Partner/spouse[ ] Child[ ] Step-child[ ] Parent[ ] Step-parent[ ] Sibling[ ] Relative[ ] Neighbour[ ] Other |

**Reasons for requesting registration of the Foreign Order in South Australia**……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………… |

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| **Accompanying Documents****Mark appropriate sections below with an ‘x’**Accompanying this Application is a:[ ] Draft order **mandatory**[ ] Supporting Affidavit **mandatory** [ ] If other additional document(s) please list below:……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………… |