

<p>To be inserted by Court</p> <p>Case Number:</p> <p>Date Filed:</p> <p>FDN:</p>
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AFFIDAVIT OF PERSON OTHER THAN PROTECTED PERSON [FULL NAME OF DEPONENT]

SUPPORT APPLICATION FOR INTERVENTION ORDER

AFFIDAVIT MADE ON [DATE]

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

[FULL NAME]
Applicant

[FULL NAME]
Respondent

Lodging party	Party title	Full name of party	
Name of law firm/office	Law firm/office	Responsible Solicitor	
<small>If applicable</small>			
Name of authorised officer	Full name		
<small>If body corporate and no law firm/office</small>			
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		

Deponent the person who is making the affidavit			
Deponent Details		Full Name	
Address		Street Address (including unit or level number and name of property if required)	
		City/town/suburb	State
		Postcode	Country
		Email address	

AffidavitI, *[full name]*,

- swear on oath that:
- do truly and solemnly affirm that:

- The relationship of the Deponent to the Respondent is *[Enter description of relationship]*.
- It is reasonable to suspect that the Respondent will commit an act of abuse against the protected person[s]
 - causing personal injury
 - causing emotional or psychological harm
 - denial of financial, social or personal autonomy
 - causing damage to property
 - [other
- [Enter description of background to relationship between protected person[s] and the Respondent]*
- The following incidents are the basis of this Application:
 - provision for multiple assaults and injuries
 - Enter if known date of incident *[date]*
 - Must enter *[Enter description of circumstances of the incident]*
 - Enter if available *[Enter details of supporting witnesses]*
 - Enter if available *[Enter details of any reports to police]*
 - optional to enter *[Enter other evidence]*
 - provision for multiple damage to property
 - Enter if known date of incident *[date]*
 - Must enter *[Enter description of circumstances of the incident]*
 - Enter if available *[Enter details of supporting witnesses]*
 - Enter if available *[Enter details of any reports to police]*
 - optional to enter *[Enter other evidence]*
 - provision for multiple harm to pets
 - Enter if known date of incident *[date]*
 - Must enter *[Enter description of circumstances of the incident]*
 - Enter if available *[Enter details of supporting witnesses]*
 - Enter if available *[Enter details of any reports to police]*
 - optional to enter *[Enter other evidence]*
 - provision for multiple emotional or psychological harm
 - Enter if known date of incident *[date]*
 - Must enter *[Enter description of circumstances of the incident]*
 - Enter if available *[Enter details of supporting witnesses]*
 - Enter if available *[Enter details of any reports to police]*
 - optional to enter *[Enter other evidence]*
 - provision for multiple denial of financial autonomy
 - Enter if known date of incident *[date]*

- Must enter [Enter description of circumstances of the incident]
- Enter if available [Enter details of supporting witnesses]
- Enter if available [Enter details of any reports to police]
- optional to enter [Enter other evidence]

provision for multiple threats and intimidation

- Enter if known date of incident [date]
- Must enter [Enter description of circumstances of the incident]
- Enter if available [Enter details of supporting witnesses]
- Enter if available [Enter details of any reports to police]
- optional to enter [Enter other evidence]

provision for multiple publishing offensive material

- Enter if known date of incident [date]
- Must enter [Enter description of circumstances of the incident]
- Enter if available [Enter details of supporting witnesses]
- Enter if available [Enter details of any reports to police]
- optional to enter [Enter other evidence]

provision for multiple stalking

- Enter if known date of incident [date]
- Must enter [Enter description of circumstances of the incident]
- Enter if available [Enter details of supporting witnesses]
- Enter if available [Enter details of any reports to police]
- optional to enter [Enter other evidence]

provision for multiple other relevant incidents

- Enter if known date of incident [date]
- Must enter [Enter description of circumstances of the incident]
- Enter if available [Enter details of supporting witnesses]
- Enter if available [Enter details of any reports to police]
- optional to enter [Enter other evidence]

5. Only complete if applicable otherwise delete The following Restraining or Intervention Orders are currently in force between the protected person[s] and the Respondent:

(a) provision for multiple Relevant order [1]

- Must enter [Enter description of the order, including details of who they affect]
- Enter if known [Enter Court of issue]
- Enter if known [Enter Court file reference number]
- Enter if known [Enter date order granted]

6. Is the Applicant aware of any relevant orders under the *Family Law Act 1975* (Cth), between a[ny] select one person[s] select one proposed to be protected by the order and the Respondent?

- Yes
- No

7. Is the Applicant aware of any relevant orders, Agreements or Contact Determinations under the *Children and Young People (Safety) Act 2017*?

- Yes
- No

8. Is the Applicant aware of any relevant orders or Agreements for the division of property under the *Family Law Act 1975* (Cth) the *Domestic Partners Property Act 1996*, or a corresponding law of another jurisdiction between a person proposed to be protected by the order and the Respondent, or any pending Application for such an order?

- Yes
- No

9. Is the Applicant aware of any other legal proceedings between a person[s] proposed to be protected by the order and the Respondent of which the Applicant is aware?

- Yes
- No

if available the above documents must be attached

- 10. Only complete if applicable [*Enter details of any known weapons in Respondent's possession*]
- 11. Only complete if applicable [*Enter other relevant information*]

[*Sworn/Affirmed*] select one by the Deponent

At [*place*]

On [*date*]

.....
Signature of Deponent

before me

Signature of attesting witness
Must be an authorised witness – see rule 31.9 from the
Uniform Civil Rules 2020

and I certify that I have sighted the original certified documents referred to by the Deponent in this Affidavit and certify that the documents are true and correct copies

.....
Printed name of witness

.....
Qualification as authorised witness under section 27A(3) of the *Oaths Act 1936*.
Stamp here if applicable

.....
Identification of witness if applicable
(ID number of Justice of the Peace; rank, identification number and "South Australia Police" for police officer)

Service

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

Instructions

- Please review the Code of Practice in relation to Affidavits published by the Attorney-General under s 33 of the *Oaths Act 1936* before completing this form.
- The person who makes the affidavit is called the deponent. The deponent makes the affidavit by taking an oath or affirmation in the presence of an authorised witness.
- Each page of the affidavit, including any exhibit(s), must be consecutively numbered starting with page 2.
- Each page of the affidavit (but not any exhibit) must be signed by both the deponent and the witness.
- A single 'front page' must be inserted in front of the exhibit(s) in Form 8.
- An exhibit to an affidavit must be clearly marked to identify it as the exhibit referred to in the affidavit.
- The declaration should be confined to facts and should not include submissions.
- The declaration should not reproduce material already contained in affidavits or other material already filed in the matter. It should not exhibit documents already exhibited to affidavits filed in the matter. In both cases it is sufficient to simply refer to such material or documents and the place where they may be found.
- An affidavit is to be sworn or affirmed in this State in accordance with section 6 of the *Evidence Act 1929* or, if made elsewhere, in accordance with the law for the taking of oaths or the making of affirmations in that place.
- The deponent must swear or affirm the affidavit before a person authorised by law to witness the swearing or affirming of affidavits ('the witness'). Persons authorised to witness an affidavit are:
 - (a) a Commissioner for taking affidavits in the Supreme Court;
 - (b) a justice of the peace;
 - (c) a police officer, other than a police officer who is a probationary constable;
 - (d) a person admitted and enrolled as a notary public of the Supreme Court;
 - (e) any other person of a class prescribed by regulation.
- The contents of the affidavit cannot be altered after the affidavit has been sworn or affirmed.
- If the deponent is illiterate or blind, see rule 31.7(6). If the deponent does not appear to understand English sufficiently, see rule 31.7(7) from the Uniform Civil Rules 2020.