**NOTICE OF CHANGE OF ADDRESS** **FOR SERVICE**

[*SUPREME/DISTRICT/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 |  |  |
| **If applicable** | **Law firm/office** | **Responsible Solicitor** |
| Name of authorised officer |  |
| **If body corporate and no law firm/office** | **Full name** |
| 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**  |

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| **Change of Address for Service**The address for service of the [*Applicant/Respondent*] is now as set out above.Date: [*date*] |

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