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

## ORIGINATING APPLICATION TO VARY OR REVOKE ORDER – NON-ASSOCIATION AND/OR PLACE RESTRICTION ORDER

[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 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					
	Number		Alternative number (optional)		

## Form 111Ee

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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					
	Number		Alternative number (optional)		
Application details					
Matter type: [Enter matter ty	/pe]				
Original Case Number: [Ent	er original case number	r]			
This Application is:  □ 1. to vary a condition of a [Non-Association/Place Restriction] select one Order. □ 2. to revoke a [Non-Association/Place Restriction] select one Order. □ 3. [Enter any other orders sought]					
This Application is made un	This Application is made under section 82(1) of the Criminal Procedure Act 1921.				
The applicant seeks the following orders:  Enter numbered paragraphs					
☐ 1. The following conditions of the [Non-Association/Place Restriction] select one Order made on [date] [Court file number], be varied:					
• provision for multiple [Enter details of variation]  □ 2. The [Non-Association/Place Restriction] select one Order made on [date] [Enter Court file number] be revoked.					
This Application is made on the grounds  □ set out in the accompanying Affidavit sworn by [name] on [date].  □ that:  Provision for grounds in numbered paragraphs  1.					
Only complete if applicable otherwise delete  The Applicant seeks leave to make this application on the grounds  set out in the accompanying Affidavit sworn by [name] on [date].  that:  Provision for grounds in numbered paragraphs					
Only complete if applicable otherwise delete  This Application is urgent on the grounds  set out in the accompanying Affidavit sworn by [name] on [date].  that:  Provision for grounds in numbered paragraphs					

Only complete if applicable otherwise delete
This Application is made with the consent of the [Enter party title] [Enter name] as evidenced by [Enter evidence] eg letter or email from party's solicitor provision for multiple

## To the Respondent: WARNING

This Application will be considered at the hearing at the date and time set out at the top of this document.

If you wish to oppose the Application or make submissions about it:

- · you must attend the hearing; and
- if you wish to rely on any facts in addition to or contrary to those relied on by the party seeking the orders, you must file and serve on all parties an Affidavit within 14 days after service of the Application.

If you do not do so, the Court may proceed **in your absence** and **orders may be made against you** without further warning.

For instructions on how to obtain access to the file, visit https://courtsa.courts.sa.gov.au/?g=node/482

## Service

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

Accon	npanying documents
Accom	panying this Application is a:
	Supporting Affidavit mandatory
	Original order mandatory
	If other additional document(s) please list below: