To be inserted by Court					
Case Number:					
Date Filed:					
FDN:					
Hearing Date and Time:					
Hearing Location:				1	
ORIGIN	JATING APPI IC	ATION NOTICE	E OF OBJECTION	d	
J. 110.1	IATINO / 11 - 1.0	/A 11011 110 110.		•	
[SUPREME/DISTRICT/MAGICIVIL JURISDICTION	STRATES  Delete all but one	COURT OF SOUTH	AUSTRALIA		
[MINOR CIVIL] If applicable					
[NAME OF LIST] LIST If applical	ble				
Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number if more than one party of the same type.					
First Applicant					
First Respondent					
FIRST Respondent					
First Interested Party					
Applicant					
	Full Name (including Also Known	as, capacity (eg Administrator, L	iquidator, Trustee) and Litigation Guard	dian Name (if applicable))	
Name of law firm / solicitor					
Address for service	Law Firm		Solicitor		
	Street Address (including unit or level number and name of property if required)				
	City/town/suburb	State	Postcode	Country	
	Email address				
Phone Details					
	Type - Number				

Duplicate panel if multiple Applicants

Form 3							
Respondent							
	Full Name (including Also	Known as canacity (eg Ad	ministrator, Liquidator, Trustee) and Liti	igation Guardian Name (if applicable))			
Address	. a ramo (moraumig znoc	thom as, supasily (sg //a		ganon Gaaranan Hamo (ii appinoazio))			
	Street Address (including	Street Address (including unit or level number and name of property if required)					
	City/town/suburb	State	Postcode	Country			
	Email address						
Phone Details							
	Type - Number						
Service	[ ] Sheriff service requested for this Respondent  If requested mark with an 'x'						
Duplicate panel if multiple Responde		x					
Interested Party							
·							
Address	Full Name (including Also	Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))					
Address							
	Street Address (including	Street Address (including unit or level number and name of property if required)					
	City/town/suburb	State	Postcode	Country			

Duplicate panel if multiple Interested Parties

## Objection

Service

Phone Details

This Objection is made in relation to [identify order or other subject of objection and Act and section or other provision under which the order or other subject of objection was made] dated [date].

1 Sheriff service requested for this Interested Party

The Objector objects to the Identify order or particular parts of the order or other subject to which objection is taken.

Email address

Type - Number

If requested mark with an 'x'

This Objection is made under Act and section or other particular provision

The grounds of objection are: Grounds in detail in separate numbered paragraphs

1.

If applicable

The Objector seeks an extension of time to lodge this Objection because: Grounds in separate numbered paragraphs

1.

The Objector requests that the hearing be by written submissions only because: Grounds in separate numbered paragraphs

## To the other parties: 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
- you must file and serve on all parties a Response within 14 days after service of the Application 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 **finally determining** this proceeding (including as to costs) without further warning.

For instructions on how to file a response to an application and 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.

Accompanying Documents Mark appropriate sections below with an 'x'					
Acc	ompanying service of this Application is a:				
] ] ] ]	<ul> <li>Multilingual Notice (mandatory)</li> <li>Supporting Affidavit (mandatory) (must be filed and served)</li> <li>Notice to Respondent Served Interstate (mandatory if address of the respondent or interested party to be served is interstate)</li> <li>Notice to Respondent Served in New Zealand (mandatory if address of the party to be served is in New Zealand)</li> <li>Notice to Respondent Served outside Australia (mandatory if address of the party to be served is outside Australia but not in New Zealand)</li> </ul>				
[	] If other additional document(s) please list them below:				

## **Note to Parties**

There can be cost penalties for making an unsuccessful application or resisting a successful application.