**REQUEST AND CERTIFICATE OF SERVICE**

[*SUPREME/DISTRICT/MAGISTRATES*] **Delete all but one** COURT OF SOUTH AUSTRALIA

[*COURT OF APPEAL*] **If applicable**

CIVIL JURISDICTION

[*MINOR CIVIL*] **If applicable**

[*NAME OF LIST*] LIST **If applicable**

**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 Interested Party

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | | | | |
| **Party Title** | **Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))** | | | | |
| Name of law firm / solicitor  **If any** |  | | |  | |
| **Law Firm** | | | **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 |  | | | | |
| **Type - Number** | | | | |

**Duplicate panel if multiple Parties**

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| **PART 1 - REQUEST FOR SERVICE ABROAD OF JUDICIAL DOCUMENTS**  **Convention on the Service Abroad of Judicial and Extrajudicial Documents in Civil or Commercial Matters, done at The Hague, the 15th of November 1965** | | | | | | | |
| Identity and address of the Applicant on whose behalf the forwarding authority requests service | Name |  | | | | | |
| **Full name** | | | | | |
| Address |  | | | | | |
| **Street Address (include unit or level number and/or name of property if necessary)** | | | | | |
|  | |  | |  | |
| **City/town/suburb** | | **State** | | **Postcode** | |
|  | | | | | |
| **Email address** | | | | | |
| Identity and address of the receiving authority (Central Authority/additional authority) | Name |  | | | | | |
| **Full name** | | | | | |
| Address |  | | | | | |
| **Street Address (include unit or level number and/or name of property if necessary)** | | | | | |
|  |  | |  | |  |
| **City/town/suburb** | **State** | | **Postcode** | | **Country** |
|  | | | | | |
| **Email address** | | | | | |
| **Mark appropriate sections below with an ‘x’**  The undersigned forwarding authority has the honour to transmit – in duplicate – the documents listed below and, in conformity with Article 5 of the above-mentioned Convention, requests prompt service of one copy thereof on the addressee [*identity of addressee and address*]  [ ] in accordance with the provisions of sub-paragraph (a) of the first paragraph of Article 5 of the Convention.  [ ] in accordance with the following particular method (sub-paragraph (b) of the first paragraph of Article 5): [*specify method*]  [ ] by delivery to the addressee, if the addressee accepts it voluntarily (second paragraph of Article 5).  The receiving authority [*Central Authority/additional authority*] is requested to return or to have returned to the applicant a copy of the following documents – [*delete following if inapplicable*] and of the annexes - with a certificate of service as provided in Part 2 of this Form.  [*list of documents*]  **SIGNATURE OR STAMP** (or both)  …………………………………………  Forwarding Authority  Done at [*place*] on [*date*]  This document is a  [ ] Request for Local Service of Foreign Judicial Documents and Certificate of Service.  [ ] Request for Service Abroad of Judicial Documents and Certificate of Service. | | | | | | | |

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| **PART 2 - CERTIFICATE OF SERVICE**  **Convention on the Service Abroad of Judicial and Extrajudicial Documents in Civil or Commercial Matters, done at The Hague, the 15th of November 1965**  **Mark appropriate sections below with an ‘x’**  The undersigned authority has the honour to certify, in conformity with Article 6 of the Convention:  [ ] that the documents listed in Part 1 have been served on [*date*] at [*place, street, number*] in one of the following methods authorised by Article 5:  [ ] in accordance with the provisions of sub-paragraph (a) of the first paragraph of Article 5 of the Convention,  [ ] in accordance with the following particular method: [*specify method*]  [ ] by delivery to the addressee, who accepted it voluntarily.  [ ] by delivery to [*identity and description of person*] having the relationship to the addressee [*relationship e.g. (family, business or other)*]  [ ] that the documents have not been served, by reason of the following facts: [*specify facts*]  **If applicable** In conformity with the second paragraph of Article 12 of the Convention, the forwarding authority is requested to pay or reimburse the expenses detailed in the attached statement.  **Annexes**  Documents returned:  [*list of documents*]  In appropriate cases, documents establishing the service:  [*list of documents*]  **SIGNATURE OR STAMP** (or both)  …………………………………………  Receiving Authority  Done at [*place*] on [*date*] |