

INVESTIGATION NOTICE

Enforcement of Judgments Act 1991 s 3A

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

First Applicant

First Respondent

Judgment Creditor	<small>Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))</small>		
Name of law firm / solicitor <small>If any</small>	<small>Law Firm</small>	<small>Solicitor</small>	
Address for service	<small>Street Address (including unit or level number and name of property if required)</small>		
	<small>City/town/suburb</small>	<small>State</small>	<small>Postcode</small>
	<small>Country</small>		
Phone Details	<small>Email address</small>		
<small>Type - Number</small>			

Duplicate panel if multiple Judgment Creditors

Amount Owing	
Case Number:	
Date Judgment entered:	
Balance owing after payments	\$
Interest since last process	\$
Issue fee (for summons)	\$
Service fee (for summons)	\$
Solicitor's Fee (including attendance)	\$
Other	\$
TOTAL OWING	\$

<p>To the Judgment Debtor</p> <p>This is an investigation notice issued under section 3A of the <i>Enforcement of Judgments Act 1991</i>.</p> <p><small>Next sentence displayed only if documents required to be produced</small> You are required to</p> <ul style="list-style-type: none"> answer the questions set out below relating to your means of satisfying the judgment set out below; and produce for inspection by the judgment creditor the documents specified below relating to relating to your means of satisfying the judgment. <p><small>Next sentence displayed only if documents required to be produced</small> You are required to answer the questions set out below relating to your means of satisfying the judgment set out below.</p>
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You are required by [date], being not less than 28 days after service of this investigation notice on you, to send the completed investigation notice to the judgment creditor by one of the means set out in rule 44.3 of the Uniform Civil Rules 2020 at the judgment creditor's address for service shown above.

Next sentence displayed only if documents required to be produced

You are required by [date], being not less than 28 days after service of this investigation notice on you, to produce for inspection by the judgment creditor the documents specified below at a place and on a date and at a time agreed between you and the judgment creditor and, to the extent that there is no such agreement between you, produce them for inspection at [place] on [date] at [time].

The purpose of this investigation notice is for the judgment creditor to assess or means of satisfying a judgement debt and either entering into an agreement with you for satisfying the debt or taking steps to enforce payment of the debt.

If you fail to complete and return this investigation notice, the judgment creditor may issue an investigation summons or take other steps to enforce the judgment and seek a special costs order against you because you failed to complete and return this investigation notice.

You should not enter into a payment agreement with the judgment creditor if you believe you do not have the financial means to satisfy the judgment debt.

To the Judgment Creditor

It is an offence to use information or documents provided in accordance with this investigation notice for a purpose other than assessing the judgment debtor's means of satisfying the judgment.

Judgment details

Court: [name and, if Magistrates Court, registry of court in which judgment entered]

Case number: [case number of case in which judgment entered]

Date of judgment: [date]

Judgment original sum (including interest to date of judgment and costs): \$

Judgment sum under previous enforcement process (if any): \$
(if no previous process, show judgment original sum from previous line)

Amount claimed

Judgment sum from last line of previous box:	\$
Payments since then (if any):	\$
Interest since then	\$
Costs recoverable since then	\$
TOTAL OWING	\$

[The judgment creditor may vary Part A and/or Part B below by altering, deleting or substituting questions without limitation subject to the questions relating to the judgment debtor's means of satisfying the judgment]

Part A Your Details

Your details

1. Name

Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))

2. Address	Street Address (including unit or level number and name of property if required)		
	City/town/suburb	State	Postcode
	Country		
3. Current occupation	Email address		
4. Previous occupations If different to current (last 3 years)			
5. Current work	<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Partnership <input type="checkbox"/> Unemployed <input type="checkbox"/> Pensioner <input type="checkbox"/> Domestic <input type="checkbox"/> Other [specify]	<input type="checkbox"/> Employer name/address: <input type="checkbox"/> Self-employed: <small>Name of business and address</small> <input type="checkbox"/> Partnership: <small>Name of business and address</small> <input type="checkbox"/> Other – [specify details]	Any benefits received: <input type="checkbox"/> Centrelink/Veterans Affairs <input type="checkbox"/> Compensation <input type="checkbox"/> Insurance <input type="checkbox"/> Superannuation <input type="checkbox"/> Maintenance <input type="checkbox"/> Other – [specify] <input type="checkbox"/> Nil
6. Do you receive any Centrelink/ Veteran Affairs payments? If Yes, you must attach your most recent statement showing the amount of payment received.	<input type="checkbox"/> Yes <input type="checkbox"/> No	If you answered Yes select the type of payments received <input type="checkbox"/> Unemployment <input type="checkbox"/> Sickness <input type="checkbox"/> Age <input type="checkbox"/> Disability <input type="checkbox"/> Sole parent <input type="checkbox"/> Widow <input type="checkbox"/> Veterans <input type="checkbox"/> Family Tax Benefit <input type="checkbox"/> Other – [specify]	
7. Previous work If not currently working (last 3 years)	<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Partnership <input type="checkbox"/> Unemployed <input type="checkbox"/> Pensioner <input type="checkbox"/> Domestic <input type="checkbox"/> Other [specify]	<input type="checkbox"/> Employer name/address: <input type="checkbox"/> Self-employed: <small>Name of business and address</small> <input type="checkbox"/> Partnership: <small>Name of business and address</small> <input type="checkbox"/> Other – [specify details]	Any benefits received: <input type="checkbox"/> Centrelink/Veterans Affairs <input type="checkbox"/> Compensation

		<input type="checkbox"/> Insurance <input type="checkbox"/> Superannuation <input type="checkbox"/> Maintenance <input type="checkbox"/> Other – <i>[specify]</i> <input type="checkbox"/> Nil
8. Do you have a current spouse/ domestic partner?	<input type="checkbox"/> Yes: <i>[provide full name]</i> <input type="checkbox"/> No	
9. Do you have a former spouse/ de facto/ domestic partner to whom you contribute financially?	<input type="checkbox"/> Yes: <i>[provide full name]</i> <input type="checkbox"/> No	If you answered Yes: I give financial support of \$ <i>[amount]</i> per week.
10. Do you have a former spouse/ de facto/ domestic partner from whom you receive financial contributions?	<input type="checkbox"/> Yes: <i>[provide full name]</i> <input type="checkbox"/> No	If you answered Yes: I receive financial support of \$ <i>[amount]</i> per week.
11. Do you have children or other dependants or persons on whom you are dependent living in your household?	<input type="checkbox"/> Yes: <i>[provide full name(s) and age(s)]</i> <input type="checkbox"/> No	If you answered Yes: 11A. Does any such person living in your household receive income (other than pocket money)? <input type="checkbox"/> Yes: <i>[provide full name(s)]</i> <input type="checkbox"/> No
12. Do you have children or other dependants for whom you contribute financially?	<input type="checkbox"/> Yes: <i>[provide full name(s)]</i> <input type="checkbox"/> No	If you answered Yes: I give financial support of \$ <i>[amount]</i> per week.
13. Bank where accounts or main account held:		
14. Do you have an interest in a family company or trust?	<input type="checkbox"/> Yes: <i>[provide full name and principal activity]</i> <input type="checkbox"/> No	

If you answered Yes to Question 8, complete this section.

Your current spouse/domestic partner's details	
15. Name	<input type="text"/> <small>Full name</small>
16. Current occupation	<input type="text"/>
17. Previous occupations If different to current (last 3 years)	<input type="text"/>

18. Current work	<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Partnership <input type="checkbox"/> Unemployed <input type="checkbox"/> Pensioner <input type="checkbox"/> Domestic <input type="checkbox"/> Other [<i>specify</i>]	<input type="checkbox"/> Employer name/address: <input type="checkbox"/> Self-employed: <small>Name of business and address</small> <input type="checkbox"/> Partnership: <small>Name of business and address</small> <input type="checkbox"/> Other – [<i>specify details</i>] Any benefits received: <input type="checkbox"/> Centrelink/Veterans Affairs <input type="checkbox"/> Compensation <input type="checkbox"/> Insurance <input type="checkbox"/> Superannuation <input type="checkbox"/> Maintenance <input type="checkbox"/> Other – [<i>specify</i>] <input type="checkbox"/> Nil
19. Previous work <small>If not currently working (last 3 years)</small>	<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Partnership <input type="checkbox"/> Unemployed <input type="checkbox"/> Pensioner <input type="checkbox"/> Domestic <input type="checkbox"/> Other [<i>specify</i>]	<input type="checkbox"/> Employer name/address: <input type="checkbox"/> Self-employed: <small>Name of business and address</small> <input type="checkbox"/> Partnership: <small>Name of business and address</small> <input type="checkbox"/> Other – [<i>specify details</i>] Any benefits received: <input type="checkbox"/> Centrelink/Veterans Affairs <input type="checkbox"/> Compensation <input type="checkbox"/> Insurance <input type="checkbox"/> Superannuation <input type="checkbox"/> Maintenance <input type="checkbox"/> Other – [<i>specify</i>] <input type="checkbox"/> Nil

If you answered Yes to Question 11A 'Does any such person living in your household receive income (other than pocket money)?' above.
Please duplicate the box below, one for each named person.

Other persons living in your household details		
20. Name	Full name	
21 Current occupation <small>If any</small>		
22. Current work <small>If any</small>	<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Partnership <input type="checkbox"/> Unemployed <input type="checkbox"/> Pensioner <input type="checkbox"/> Domestic <input type="checkbox"/> Other [<i>specify</i>]	<input type="checkbox"/> Employer name/address: <input type="checkbox"/> Self-employed: <small>Name of business and address</small> <input type="checkbox"/> Partnership: <small>Name of business and address</small> <input type="checkbox"/> Other – [<i>specify details</i>]

		Any benefits received: <input type="checkbox"/> Centrelink/Veterans Affairs <input type="checkbox"/> Compensation <input type="checkbox"/> Insurance <input type="checkbox"/> Superannuation <input type="checkbox"/> Maintenance <input type="checkbox"/> Other – <i>[specify]</i> <input type="checkbox"/> Nil
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Part B Your Financial Circumstances

Income (before tax)		\$[amount per week]		
		Applicant	Spouse/partner	Company/trust (net income after deductible expenses and tax)
Income	Wage/Salary	\$	\$	
	Self employed	\$	\$	
	Investments/Dividends	\$	\$	
	Income from rental property	\$	\$	
	Pension benefit or allowance (eg. Centrelink, Veterans Affairs benefit)	\$	\$	
	Child support	\$	\$	
	Superannuation/Insurance payments	\$	\$	
	Other – <i>[specify]</i>	\$	\$	
Total income		\$	\$	\$

Household expenses		\$[amount per week]	
Expenses	Rent/Board	\$	
	Mortgage	\$	
	Food	\$	
	Household expenses <small>(eg groceries, cleaning, maintenance)</small>	\$	
	Health <small>(eg Medicine, chemist, health fund)</small>	\$	
	Clothing	\$	
	Children <small>(eg nappies, formula, sport, childcare)</small>	\$	
	Education <small>(eg fees, books, uniforms etc).</small>	\$	
	Energy <small>(eg electricity, gas, heating etc)</small>	\$	
	Phone and internet	\$	
	Rates	\$	

	(eg council and SA Water)	
	Insurance (eg house, contents)	\$
	Vehicle expenses (eg fuel, registration, maintenance)	\$
	Other transport (eg bus or train fares)	\$
	Car loan	\$
	Credit card	\$
	Other – [specify]	\$
Total expenses		\$

Household assets		
Assets	Real estate	\$
	Vehicle	\$
	Savings	\$
	Investments	\$
	Other – [specify]	\$
Total assets		\$

Household liabilities		
Liabilities	Judgment debts	\$
	Fines (outstanding with Court)	\$
	Mortgage	\$
	Car loan	\$
	Credit card	\$
	Centrelink	\$
	Other – [specify]	\$
Total liabilities		\$

Other		
List specified questions if not listed above. Delete if inapplicable.		

Next box displayed only if documents required to be produced

<p>You are required to provide to the judgment creditor for inspection in accordance with rule 73.12 of the Uniform Civil Rules 2020 [place and time] the documents in column A below relating to your means of satisfying the judgment.</p>	
A Documents sought	B Documents produced (list and describe)
1 [description of document(s) sought by judgment creditor]	

2	
3	
4	

Signature of Judgment Debtor

The information contained in this investigation notice (including relating to documents sought if applicable) is true to the best of my knowledge, information and belief.

.....
Signature of deponent

.....
Name printed

.....
Date

Financial Counselling Services

The Financial Counselling Service is a **FREE** and **CONFIDENTIAL** counselling and advisory service for people who are:

- having trouble making ends meet
- in debt or have high bills
- faced with a sudden drop in income
- behind in loan/credit repayments
- unfairly or unjustly treated by traders or creditors
- facing court action because of debts
- considering bankruptcy

You will still have control of your money. Financial Counsellors will provide the skills and knowledge to help you to work out your money problems. However, the decision to follow the advice is yours.

Financial Counsellors can:

- talk to your creditors about your debts
- advocate for you if you have been treated unfairly
- help you plan your finances

Financial Counsellors can give you information and advice on:

- dealing with creditors
- concessions and benefits
- consumer rights
- credit and debt issues
- bankruptcy information

If you would like the services of a Financial Counsellor, call **1800 007 007** and make an appointment with one of the financial counselling service agencies listed on the South Australian Financial Counselling Association’s website:

<http://www.safca.org.au>