South Australia Corporations Rules 2003 (SA)

SCHEDULE 1—FORMS

Schedule 1—Forms dated 5 May 2020:

- 1. come into effect by Amendment No. 10 (Government Gazette 14 May 2020, p. 996
- 2. come into operation on 18 May 2020
- 3. relate to the Corporations Rules 2003 (SA) dated 24th February, 2003, that came into operation on 1st April, 2003 (South Australian Government Gazette, 13 March, 2003, p. 880).

Schedule 1 – Forms

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Form CORP 1 Title – Corporation

To be inserted by Court		
Case Number:		
Date Filed:		
FDN:		
	[DOCUMENT TITLE]	
SUPREME COURT OF SOUT CIVIL JURISDICTION Corporations List	⁻ H AUSTRALIA	
IN THE MATTER OF [full name appointed)', '(receiver and manag	e of corporation to which the proceeding relates and ger appointed)', '(controller acting)', or '(under admir	d, if applicable, the words '(in liquidation)', '(receiver nistration)']
ABN or ACN or ARBN: [insert.	ABN or ACN or ARBN]	
Please specify the Full Name including capacit f more than one party of the same type.	ty (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name	(if applicable) for each party. Each party should include a party number
First Applicant		
First Respondent		
First Interested Party		
odging panel if first document filed by the pale Applicant	rty in the proceeding	
πρριισατιί		
Name of law firm / solicitor	Full Name including Also Known as, capacity (eg Administrator, Liqu	Idator, Trustee) and Litigation Guardian Name (if applicable)
	Law Firm	Solicitor

Address				
	Street Address including unit or lev	vel number and name of property	if required	
	City/town/suburb	State	Postcode	Country
	Email address			
Phone Details				
	Type - Number			

Duplicate panel if multiple Applicants

Lodging panel if not the first document filed by the party in the proceeding

Lodging Party	-	
	Full Name (including Also Known as, capacity (eg Administrator, Liqu	uidator, Trustee) and Litigation Guardian Name (if applicable))
Name of law firm / solicitor		
,	Law Firm	Solicitor

Form CORP 2 Originating Process

F	$\overline{}$	rn	n	C	\cap	R	P	2

To be inserted by Court			
Case Number:			
Date Filed:			
FDN:			
Hearing Date and Time:			
Hearing Location:			
	ORIGINATIN	NG PROCE	SS
SUPREME COURT OF SOUT CIVIL JURISDICTION Corporations List	⁻ H AUSTRALIA		
IN THE MATTER OF [full name appointed)', '(receiver and manag	e of corporation to which the proc ger appointed)', '(controller acting)	eeding relates and ', or '(under admir	d, if applicable, the words '(in liquidation)', '(receiver nistration)']
ABN or ACN or ARBN: [insert /	ABN or ACN or ARBN]		
Please specify the Full Name including capacit f more than one party of the same type.	y (eg Administrator, Liquidator, Trustee) and L	itigation Guardian Name	(if applicable) for each party. Each party should include a party number
First Applicant			
First Respondent			
A 11	Г		
Applicant	Full Name includion Alex Versus V	u (an Administrator II	ideter Trustee) and Hibration County Name (Manufactor)
Name of law firm / solicitor	ruii wame including Also Known as, capacity	y (eg Aaministrator, Liqu	idator, Trustee) and Litigation Guardian Name (if applicable)
•	Law Firm		Solicitor

	T				
Address					
	Street Address including unit or lev	vel number and name of property i	f required		
	City/town/suburb	State	Postcode	Country	
	City/town/suburb	State	Fosicode	Country	
Phone Details	Email address				
Thomas Batalla					
Duplicate panel if multiple Applicants	Type - Number				
Respondent					
	Full Name including Also Known as	. capacity (eg Administrator, Liqui	idator, Trustee) and Litigation Guardian	Name (if applicable)	
Address	g	,, (-g	,, <u>-</u> <u>-</u>	- Constitution of the cons	
	Otana (Adalana a la alculta a contra a la co	-1 t			
	Street Address including unit or lev	el number and name of property if	required		
	City/town/suburb	State	Postcode	Country	
D. D "	Email address				
Phone Details					
	Type – Number				
Service					
	[] Sheriff service red	quested for this Respo	ondent		
	If requested mark with an 'x'				
Duplicate panel if multiple Respondents					
A. Details of Application					
This Application is for State briefly the nature of the proceeding, eg	a application for winding-up on groun	d of insolvency: or complaint abou	ut a receiver		
	3.7.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
This Application is made und	der [section or other particu	ular provision) of the			
Delete inapplicable section below or mark a		nar providion; or the			
[] Corporations Act 2001	(Cth)				
[] Australian Securities a	and Investments Act 200	1 (Cth).			
[] Cross-Border Insolver	ncy Act 2008 (Cth).				
[] Corporations Regulation	ons 2001 (Cth).				
[] [other] .	,				
[] [outer].					
On the facts stated in the supporting affidavit, the Applicant seeks the following orders: Orders sought in separately numbered paragraphs.					
1.					
				ļ	

B. Application for Winding Up on Ground of Insolvency

Complete this section if this originating process is seeking an order that a company be wound up in insolvency on the ground that the company has failed to comply with a statutory demand (see section 459Q of the Corporations Act)

[Set out particulars of service of the statutory demand on the company and of the failure to comply with the demand]

Attach to this originating process a copy of the statutory demand and, if the demand has been varied by an order made under subsection 459H (4) of the Corporations Act because of a dispute or offsetting claim, a copy of the order made under that subsection.

The affidavit in support of this originating process must:

- (a) verify service of the demand on the company: and
- (b) verify the failure of the company to comply with the demand; and
- (c) state whether and, if so, to what extent the debt, or each of the debts, to which the demand relates is still due and payable at the date when the affidavit is made.

Notice to the Respondent(s)

TO: the Respondent(s) named in this Originating Process

This Application will be considered at the hearing at the date and time set out at the top of this document. If you or your legal practitioner do not appear before the Court at that time, the application may be dealt with, and an order made, in your absence. As soon after that time as the business of the Court will allow, any of the following may happen:

- a) the application may be heard and final relief given;
- b) directions may be given for the future conduct of the proceeding;
- c) any interlocutory application may be heard.

Before appearing before the Court, you must file a Notice of Appearance, in the prescribed form, in the Registry and serve a copy of it on the Applicant.

Note

Unless the Court otherwise orders, a respondent that is a corporation must be represented at a hearing by a legal practitioner. It may be represented at a hearing by a director of the corporation only if the Court grants leave.

Service

Complete the following section if the time for service has been abridged

The Court ordered that the time for serving this originating process be abridged to [date].

- [] It is not intended to serve this originating process on any person.
- [] It is intended to serve this originating process on each other party and on any person listed below:

[name of other parties and any other person on whom the Originating Process is to be served].

Accompanying Documents

Mark appropriate sections below with an 'x'

Accompanying service of this Originating Process is a:

]]]]	 Multilingual Notice (mandatory) Supporting Affidavit (mandatory) Notice to Respondent Served Interstate (mandatory if address of the respondent or interested party to be served is interstate) Notice to Respondent Served in New Zealand (mandatory if address of the party to be served is in New Zealand) Notice to Respondent Served outside Australia (mandatory if address of the party to be served is outside Australia but not in New Zealand)
[] If other additional document(s) please list them below:

Form CORP 2A Originating Process – Ex Parte

Form CORP 24

Hearing Location:

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

ORIGINATING PROCESS - EX PARTE

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List

IN THE MATTER OF [full name of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver appointed)', '(receiver and manager appointed)', '(controller acting)', or '(under administration)']

ABN or ACN or ARBN: [insert ABN or ACN or ARBN]

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

Applicant		
	Full Name including Also Known as, capacity (eg Administrator, Liqu	idator, Trustee) and Litigation Guardian Name (if applicable)
Name of law firm / solicitor		
_	Law Firm	Solicitor

Address				
	Street Address including unit or le	vel number and name of property	if required	
	Chook Addition moraling and of the	The state of the s	- I roquirou	
		0.1		
	City/town/suburb	State	Postcode	Country
	Email address			
Phone Details				
Duplicate panel if multiple Applicants	Type - Number			
Duplicate parier il multiple Applicants				

Details of Appl	ication
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This Application is for State briefly the nature of the proceeding,

This Application is made under [section or other particular provision] of the Delete inapplicable section below or mark applicable section below with an 'x'.

Corporations Act 2001 (Cth).

Australian Securities and Investments Act 2001 (Cth).

[] Cross-Border Insolvency Act 2008 (Cth).

[] Corporations Regulations 2001 (Cth).

[] [other].

On the facts stated in the supporting affidavit, the Applicant seeks the following orders: Orders sought in separately numbered paragraphs.

1.

Accompanying Documents

Mark appropriate sections below with an 'x'

Accompanying service of this Application is a:

-] Supporting Affidavit (mandatory)
- [] If other additional document(s) please list them below:

Form CORP 3 Interlocutory Process

Form	CO	DD	2
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To be inserted by Court		
Case Number:		
Date Filed:		
FDN:		
Hearing Date and Time:		
Hearing Location:		
	INTERLOCUTORY PROC	ESS
SUPREME COURT OF SOUT CIVIL JURISDICTION Corporations List	TH AUSTRALIA	
IN THE MATTER OF [full name of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver appointed)', '(receiver and manager appointed)', '(controller acting)', or '(under administration)']		
ABN or ACN or ARBN: [insert i	ABN or ACN or ARBN]	
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 f more than one party of the same type.		
First Applicant		
First Respondent		
Lodging Party		
	Full Name (including Also Known as, capacity (eg Administrator, Liqu	uidator, Trustee) and Litigation Guardian Name (if applicable))
Name of law firm / solicitor if		
	Law Firm	Solicitor

Details of Application	
This Application is for Nature of application in one sentence	
This Application is made under [section, regulation or other provision] of the Delete inapplicable section below or mark applicable section below with an 'x'.	
[] Corporations Act 2001 (Cth).	
[] Australian Securities and Investments Act 2001 (Cth).	
[] Cross-Border Insolvency Act 2008 (Cth).	
[] Corporations Regulations 2001 (Cth).	
[] [other].	
On the facts stated in the supporting affidavit, the above named party seeks the following orders: Orders sought in separately numbered paragraphs 1.	
If applicable This application is urgent on the grounds set out in the accompanying affidavit sworn by [full name] on [date].	
If applicable This application is by consent. The consent is evidenced as attached.	
If applicable This application is made ex parte because: Grounds	

Notice to other parties

TO: [name of each person against whom orders are sought in this interlocutory application]

The Application will be considered at the hearing at the date and time set out at the top of this document. If you or your legal practitioner do not appear before the Court at that time, the application may be dealt with, and an order made, in your absence.

Before appearing before the Court, you must, except if you have already done so or you are the plaintiff in this proceeding, file a notice of appearance, in the prescribed form, in the Registry and serve a copy of it on the plaintiff in the originating process.

Note

Unless the Court otherwise orders, a respondent that is a corporation must be represented at a hearing by a legal practitioner. It may be represented at a hearing by a director of the corporation only if the Court grants leave.

if app	vice Court ordered that the time for serving this application be abridged to [date].
[] It is not intended to serve this Originating Application on any person.
[] It is intended to serve this Originating Application on each other party and on any person listed below:
	[name of other parties and any other person on whom the Originating Application is to be served].

Accompanying Documents Mark appropriate sections below with an 'x'	
Acc	ompanying service of this Application is a:
[] Supporting Affidavit (mandatory)
[] If other additional document(s) please list them below:

Form CORP 4 Notice of Appearance

Form CORP 4	
To be inserted by Court	
Case Number:	
Date Filed:	
FDN:	
	NOTICE OF APPEARANCE
SUPREME COURT OF SOUT CIVIL JURISDICTION Corporations List	H AUSTRALIA
	e of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver ser appointed)', '(controller acting)', or '(under administration)']
ABN or ACN or ARBN: [insert A	ABN or ACN or ARBN]
Please specify the Full Name including capacit if more than one party of the same type.	y (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number
First Applicant	
First Respondent	
Interested Party	
Name of law firm / solicitor If any	Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))
Name of responsible officer Where body corporate	Law Firm Solicitor
Address for service	Name
	Street Address (including unit or level number and name of property if required)

Country

City/town/suburb

Email address

Phone Details	
	Type - Number

Duplicate panel if multiple Interested Parties

Details of person intending to appear

Notice is given that the abovenamed Interested Party, being [briefly state interest in the proceeding - eg a creditor for \$[amount] or a contributory, of the corporation] intends to appear before the Court at the hearing of the application for winding up and, if applicable, to [oppose/support] the application.

Note

Unless the Court otherwise orders, a party that is a corporation must be represented at a hearing by a legal practitioner. It may be represented at a hearing by a director of the corporation only if the Court grants leave.

Complete next panel only if opposing an application to wind up a company

Grounds of Opposition to Winding Up

The grounds on which the application for winding up is opposed are: Grounds in separately numbered paragraphs

1.

Signature of person giving notice or of person's legal practitioner

Form CORP 5 Notice of Intervention by ASIC

Form CORP 5 To be inserted by Court Case Number: Date Filed: FDN: NOTICE OF INTERVENTION BY ASIC SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List IN THE MATTER OF [full name of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver appointed)', '(receiver and manager appointed)', '(controller acting)', or '(under administration)'] ABN or ACN or ARBN: [insert ABN or ACN or ARBN] 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 The Australian Securities and Investments Commission Interested Party Name of responsible officer Name Address

Street Address (including unit or level number and name of property if required)

State

Postcode

City/town/suburb

Email address

Notice of intervention
The Australian Securities and Investments Commission, whose address for service is shown above, intervenes in this proceeding.
Date: [date]
Signed on behalf of ASIC
Name of signatory: [name]
Capacity of signatory: [capacity]

Form CORP 6 Notice of Hearing to Approve Compromise or Arrangement

NOTICE OF HEARING TO APPROVE COMPROMISE OR ARRANGEMENT

To all the creditors and members of [name of company]

TAKE NOTICE that at [time] on [date], the Supreme Court of South Australia will hear an application by [name of applicant] seeking the approval of a compromise or arrangement between the above-named company and its [members/creditors] as proposed by a resolution passed by the meeting of the [members/creditors] of the company held on [date].

If applicable

The proposed compromise or arrangement as passed by the meeting was amended from the form of compromise or arrangement previously sent to you in the following respects:

[set out the details of any amendment made at the meeting]

If you wish to oppose the approval of the compromise or arrangement, you must file and serve on the applicant a notice of appearance, in the prescribed form, together with any affidavit on which you wish to rely at the hearing. The notice of appearance and affidavit must be served on the applicant at its address for service at least 1 day before the date fixed for the hearing of the application.

The address for service of the applicant is [address of applicant's legal practitioner or of applicant

Name of person giving notice or of person's legal practitioner: [name]

Form CORP 7 Affidavit Accompanying Statutory Demand

AFFIDAVIT ACCOMPANYING STATUTORY DEMAND

Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for party. Each party should include a party number if more than one party of the same type.

[Name of creditor/s] Creditor(s)

[Name of debtor company]
Debtor company

Affidavit Delete inapplicable section below or mark applicable section below with an 'x'
I [name] of [address and occupation], [] swear on oath / [] do truly and solemnly affirm that:
1. I am [state deponent's relationship to the creditor(s),eg 'the creditor', '(name), one of the creditors', 'a director of the creditors', 'a director of [name], one of the creditors'] named in the statutory demand, which this affidavit accompanies, relating to the [debt/debts] owed by [name of debtor company].
Only applicable if deponent is not the creditor 2. [State the facts entitling the deponent to make the affidavit, eg 'I am authorised by the creditor(s) to make this affidavit on its/their behalf'.]
3. [State the source of deponent's knowledge of the matters stated in the affidavit in relation to the debt or each of the debts,- eg 'l am the person who, on behalf of the creditor(s), had the dealings with the debtor company that gave rise to the debt', 'l have inspected the business records of the creditor in relation to the debtor company's account with the creditor']
4. The [debt of \$[amount] / total \$[amount] of the debts] mentioned in the statutory demand is due and payable by debtor company.
5. I believe that there is no genuine dispute about the existence or amount of the [debt/any of the debts].
Deposed by the deponent (person who is swearing/affirming the affidavit)
At
On
Signature of Deponent
Name printed
before me Signature of attesting witness
Printed name and title of witness Stamp here if applicable
Date
ID number of witness

Form CORP 8 Consent of Liquidator or Provisional Liquidator

Law Firm

Form CORP 8 To be inserted by Court Case Number: Date Filed: FDN: CONSENT TO ACT OF [PROVISIONAL] LIQUIDATOR SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List IN THE MATTER OF [full name of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver appointed)', '(receiver and manager appointed)', '(controller acting)', or '(under administration)'] ABN or ACN or ARBN: [insert ABN or ACN or ARBN] 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 **Lodging Party** Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable)) Name of law firm / solicitor if

Solicitor

Consent
I, [name], of [address], a registered liquidator, consent to be appointed by the Court and to act as the [liquidator/provisional liquidator] of [name of company].
I am not aware of any conflict of interest or duty that would make it improper for me to act as [provisional] liquidator of the company.
Mark appropriate section below with an 'x'.
[] I am not aware of any relevant relationship mentioned in subsection 60(2) of the Corporations Act 2001.
[] I have, or have had within the preceding 24 months, the following relevant relationships mentioned in subsection 60(2) of the Corporations Act 2001: [set out all relevant relationships].
The time-cost rates currently charged in respect of work done as [provisional] liquidator by me, and by my partners and employees who may perform work in this administration, are set out below or in the Schedule attached to this Consent.
I acknowledge that my appointment by the Court does not constitute an express or implied approval by the Court of these rates.
[current rates – unless set out in schedule]
Date: [date]
Signature of registered liquidator

The remuneration that an external administrator is entitled to receive for necessary work properly performed by the external administrator in relation to the external administration of a company is regulated by Division 60 of the Insolvency Practice Schedule (Corporations).
If applicable
Schedule
[Description of time-cost rates]

Note

Form CORP 9 Notice of Application for Winding Up Order

NOTICE OF APPLICATION FOR WINDING UP ORDER

SUPREME COURT OF SOUTH AUSTRALIA

CIVIL JURISDICTION

Corporations List

Case Number: [insert case number]

[Name of company]

ACN or ABN: [ACN or ABN of company to which proceeding relates]

- 1. A proceeding for the winding up of [name of company if applicable, the words 'trading as' and any trading name or names of the company] was commenced by the applicant [name of applicant] on [date of filing of originating application] and will be heard by [name] on [date] at [time] at [address]. Copies of documents filed may be obtained from the applicant's address for service.
- 2. The applicant's address for service is [address of applicant's legal practitioner or of applicant].
- 3. Any person intending to appear at the hearing must file a notice of appearance, in accordance with the prescribed form, together with any affidavit on which the person intends to rely, and serve a copy of the notice and any affidavit on the applicant at the applicant's address for service at least 3 days before the date fixed for the hearing.

Date: [date]

Name of applicant or applicant's legal practitioner: [name]

Form CORP 10 Notice of Application for Winding Up Order by Substituted Applicant

NOTICE OF APPLICATION FOR WINDING UP ORDER BY SUBSTITUTED APPLICANT

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List

Case Number: [insert case number]

[Name of company]

ACN or ABN: [ACN or ABN of company to which proceeding relates]

- 1. [Name of substituted applicant], who was by order of the Supreme Court of South Australia, substituted as applicant, will apply to the Court on [date] at [time] at [address] for an order that the above company be wound up.
- 2. The address for service of the substituted applicant is [address of substituted applicant's legal practitioner or of substituted applicant].
- 3. Any person intending to appear at the hearing must file a notice of appearance, in accordance with the prescribed form, together with any affidavit on which the person intends to rely, and serve a copy of the notice and any affidavit on the applicant at the applicant's address for service at least 3 days before the date fixed for the hearing.

Date: [date]

Name of substituted applicant or substituted applicant's legal practitioner: [name]

Form CORP 11 Notice of Winding Up Order and of Appointment of Liquidator

NOTICE OF WINDING UP ORDER AND APPOINTMENT OF LIQUIDATOR

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List Case Number: [number]

IN THE MATTER OF [name of company to which the proceeding relates]

ABN or ACN: [ABN or ACN of company to which proceeding relates]

On [date], in [case number], the Supreme Court of South Australia ordered the winding up of [name of company] and I was appointed as liquidator of the above company.

Date: [date]

Name and address of liquidator: [name and address]

Form CORP 12 Notice of Appointment of Provisional Liquidator

NOTICE OF APPOINTMENT OF PROVISIONAL LIQUIDATOR

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List Case Number: [number]

IN THE MATTER OF [name of company to which the proceeding relates]

ABN or ACN: [ABN or ACN of company to which proceeding relates]

On [date], in [case number], heard by the Supreme Court of South Australia, I was appointed as the provisional liquidator of the above company.

Date: [date]

Name and address of provisional liquidator: [name and address]

Form CORP 13 Notice of Objection to Release of Liquidator

Form CORP 13 To be inserted by Court Case Number: Date Filed: FDN: NOTICE BY CREDITOR OR CONTRIBUTORY OF OBJECTION TO RELEASE OF LIQUIDATOR SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List IN THE MATTER OF [full name of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver appointed)', '(receiver and manager appointed)', '(controller acting)', or '(under administration)'] ABN or ACN or ARBN: [insert ABN or ACN or ARBN] 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 Interested Party the Objector Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable)) Name of law firm / solicitor Law Firm Solicitor Address for service

Street Address (including unit or level number and name of property if required)

State

City/town/suburb

Email address

Postcode

Country

Phone Details	
	Type - Number

Duplicate panel if multiple Interested Parties

Notice of objection
The above named Objector, a Mark appropriate sections below with an 'x'
 creditor of [name of company] for \$[amount] contributory of [name of company] holding [number] shares in the company,
objects to the grant of a release to [name of liquidator] of [address of liquidator], who is the liquidator of the Company, on the following grounds: Set out grounds on which objection is made in separately numbered paragraphs
1.
Date: [date]
Signature of objector or objector's legal practitioner
Name of objector or objector's legal practitioner: [name]
The objector's address for service is set out above.

Form CORP 14 Affidavit in Support of Application for Order for Payment of Call

Form CORP 14 To be inserted by Court Case Number: Date Filed: FDN: AFFIDAVIT OF [NAME] MADE ON [DATE] IN SUPPORT OF APPLICATION FOR ORDER FOR PAYMENT OF CALL SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List IN THE MATTER OF [full name of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver appointed)', '(receiver and manager appointed)', '(controller acting)', or '(under administration)'] ABN or ACN or ARBN: [insert ABN or ACN or ARBN] 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 **Lodging Party** Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable)) Name of law firm / solicitor if Law Firm Solicitor **Deponent Details**

Deponent

Full Name

Add	dress				
		Street Address (including unit or lev	rel number and name of property if rec	quired)	
		City/town/suburb	State	Postcode	Country
Oc	cupation	Email address			
	·	Occupation			
	idavit appropriate section below with an 'x'				
Ι[] swear on oath / [] swear on oath / [] do truly and solemnly affirm that:			
1.	I am the liquidator of [name of company] ("the company").				
2.	2. On [date] I made a call of \$[amount] per share on [all the contributories of the company or specify the class of contributories] of the company. Exhibited and marked A is a copy of the notice of the call. Each contributory whose name is shown in the Schedule marked B was duly served with notice of the call in the form exhibited and marked A.				
3.	 Each contributory of the company whose name is set out in column 2 of the Schedule marked B has not paid, o caused to be paid, to me the sum specified opposite the contributory's name in column 5 of the Schedule, which is due from that contributory under the call. 				
4.	The amount set out opposite the name of each contributory in column 6 of the Schedule is an estimate of the amount due by that contributory in respect of the costs of applying for and giving effect to the order for payment of the call. The estimate of the amounts so due by the several contributories has been reached by apportioning the costs among the contributories who have not paid the call according to the liability of the respective contributories to contribute.				
5.	5. The amount set out opposite the name of each contributory in column 7 of the Schedule is the total of the amount due by that contributory in respect of the call as set out in column 5 and the amount due in respect of costs as set out in column 6.				
De	posed by the deponent (p	erson who is swearing/a	ffirming the affidavit)		
At					
On					
Signature of deponent					
Name printed					
bef	ore me Signature of atte				

Drinted name and title of witness
Printed name and title of witness
Stamp here if applicable
• • •
Date
ID number of witness
lf applicable

Instructions

- Each page of the affidavit, including any exhibit(s), must be consecutively numbered starting with page 2.
- The affidavit should be confined to facts and should not include submissions.
- The affidavit should not reproduce material already contained in affidavits or other material already filed in the
 matter. It should not exhibit documents already exhibited to affidavits filed in the matter. In both cases it is sufficient
 to simply refer to such material or documents and the place where they may be found.
- An exhibit to an affidavit must be clearly marked to identify it as the exhibit referred to in the affidavit.
- A single 'front page' must be inserted in front of the exhibits in Form CORP 4A.
- Each page of the affidavit (but not any exhibit) must be signed by both the deponent and the witness.
- An affidavit is to be sworn if it is made in this State in accordance with section 6 of the *Evidence Act 1929* or, if made elsewhere, in accordance with the law for the taking of oaths or the making of affirmations in that place.
- The deponent must swear or affirm the affidavit before a person authorised by law to witness the swearing or affirming of affidavits ('the witness'). Persons authorised to witness an affidavit are:
 - (a) a Registrar or Deputy Registrar
 - (b) any other officer of the Court whom the Registrar has assigned for this purpose;
 - (c) a public notary;
 - (d) a commissioner for taking affidavits;
 - (e) a justice of the peace for South Australia;
 - (f) any other person authorised by law to take affidavits.
- The contents of an affidavit cannot be altered after the affidavit has been sworn or affirmed.
- The party serving an affidavit must serve copies of all exhibits with the affidavit.

Service

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

Exhibit A

(copy notice of demand)

			Schedule B			
Number on list of contributories	Name	Address	Character in which included in the list	Unpaid amount of call	Proportion of costs of application	Total amount payable
[number]	[name]	[address]	[character]	[amount]	[percentage]	[amount]

Form CORP 15 Notice of Application for Leave to Distribute a Surplus

Signature of liquidator

NOTICE OF APPLICATION FOR LEAVE TO DISTRIBUTE A SURPLUS

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List Case Number: [insert case number]
IN THE MATTER OF [Company name]
ACN or ABN: [ACN or ABN of company to which proceeding relates]
On [date] at [time] at [address] the Supreme Court of South Australia will hear an application by the liquidator of [name of company] in case number [number] for leave to distribute a surplus in respect of the liquidation of the company.
Any person intending to appear at the hearing must file a notice of appearance, in accordance with the prescribed form, together with any affidavit on which the person intends to rely, and serve a copy of the notice and any affidavit on the applicant at the applicant's address for service at least 3 days before the date fixed for the hearing.
Name of liquidator: [name]
The liquidator's address for service is: [address]

Form CORP 16 Notice of Intention to Apply for Review of Remuneration

NOTICE OF INTENTION TO APPLY FOR REMUNERATION

IN THE MATTER OF [company name] ABN or ACN: [ABN or ACN of company to which proceeding relates]
TO: [name and address of person to whom notice is given] Provide details of multiple parties if required
TAKE NOTICE that, not less than 21 days after this notice is served on you, I [name and address], the [receiver/external administrator/liquidator/provisional liquidator/special manager] of the above company, intend to apply to the Court to determine my remuneration.
If you object to my application, you must, within 21 days after being served with this notice, serve on me a notice of objection stating the grounds of objection to the remuneration claimed.
Date: [date]
Signature of [receiver/external administrator/liquidator/provisional liquidator/special manager]

NOTICE OF INTENTION TO APPLY FOR REVIEW OF REMUNERATION - CORPORATION

IN THE MATTER OF [company name]
ABN or ACN: [ABN or ACN of company to which proceeding relates]
TO: [name and address of person to whom notice is given]
Provide details of multiple parties if required
TAKE NOTICE that, not less than 21 days after this notice is served on you, I, [name and address], [the external administrator/liquidator] of the above company, intend to apply to the Court to review [the remuneration of/my remuneration as] the [external administrator/liquidator] of the above company.
The amount of the remuneration that has been determined or fixed is \$[amount]. The remuneration was determined or fixed by [state who determined or fixed the remuneration] on [state the date when the remuneration was determined or fixed].
I intend to apply for an order to [confirm/increase//reduce] the remuneration.
[Set out the grounds upon which an order or orders will be sought. If an order to increase or reduce the remuneration is sought, set out the amount by which the remuneration is sought to be increased or reduced.]
If you wish to appear at the hearing of the application, in order to raise any issues before the Court, you must, within 21 days after being served with this notice, serve on me a notice under subrule 9.2A(4) of the Corporations Rules 2003 (South Australia), stating your intention to appear at the hearing and setting out the issues that you seek to raise before the Court.
Date: [date]
Signature of proposed applicant

Form CORP 17 Summons for Public Examination

Law Firm

Form CORP 17	
To be inserted by Court	
Case Number:	
Date Signed:	
FDN:	
Hearing Date and Time:	
Hearing Location:	
	SUMMONS FOR PUBLIC EXAMINATION
SUPREME COURT OF SOUT CIVIL JURISDICTION Corporations List	H AUSTRALIA
	e of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver ser appointed)', '(controller acting)', or '(under administration)']
ABN or ACN or ARBN: [insert /	ABN or ACN or ARBN]
Please specify the Full Name including capacit if more than one party of the same type.	y (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number
First Applicant	
First Respondent	
Lodging Party	
Name of law firm / solicitor	Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))

Solicitor

Details of Summons				
TO: [name and address of person to be examined].				
You are summoned under section [596A/596B] of the Corporations Act to:				
] attend before the court at the time and place set out at the top of this document and from day to day until excuse by the Court, to be examined on oath or affirmation about the examinable affairs of [name of corporation];				
[] produce at the examination the following books: [books -include in a schedule if necessary]				
Notice to the Person to be Examined				
The Court may order that the questions put to you and the answers given by you at the examination are to be recorded in writing and signed by you.				
If you do not attend the examination in accordance with this summons, without reasonable cause, you may be arrested and imprisoned without further notice.				
This summons is issued at the request of the lodging party named above whose address for service is set out above.				
If applicable Schedule				
[List of books required to be produced]				
Court use only				

.....

Registrar

Form CORP 17A Arrest Warrant

Name of law firm / solicitor If any

Law Firm

Form CORP 17A	
To be inserted by Court	
Case Number:	
Date Signed:	
FDN:	
	ARREST WARRANT
SUPREME COURT OF SOUTH CIVIL JURISDICTION Corporations List	1 AUSTRALIA
IN THE MATTER OF [full name appointed)', '(receiver and manage	of corporation to which the proceeding relates and, if applicable, the words '(in liquidation)', '(receiver er appointed)', '(controller acting)', or '(under administration)']
ABN or ACN or ARBN: [insert A	BN or ACN or ARBN]
Please specify the Full Name including capacity if more than one party of the same type.	(eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number
First Applicant	
First Respondent	
Lodging Party	

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

Solicitor

Person subject of the warrant				
Full name	Full name			
	Street Address (including unit or level number and name of property if required)			
Address	City/town/suburb	State	Postcode	Country
	Email address			
Telephone	Type - Number			

To the Sheriff and the Sheriff's Officers, to all members and special members of the Australian Federal Police and to all officers of the police force of the State or Territory in which [name of person] is found.

Recitals

[name] ('the Company'") is being wound up in insolvency.
[name] ('the Company') is being wound up by the Court.
an application has been made for [name] ('the Company') to be wound up.
And the Court is satisfied that [name of person]
[] is about to leave [name of jurisdiction/Australia], in order to avoid
[] paying money payable to the Company.
[] being examined about the Company's affairs.
[] complying with an order of the Court, or some other obligation, under Chapter 5 of the Corporations Act 2001 (Cth) in connection with the winding up.
[] has concealed or removed property of the Company in order to prevent or delay the taking of the property in the liquidator's custody or control:

This Warrant therefore requires and authorises you to take [name of person] and to bring [him/her] before the Court at 1 Gouger Street, Adelaide in the State of South Australia and to keep [him/her] there pending the making of a further order by the Court.

has destroyed, concealed or removed books of the Company or is about to do so.

This Warrant also requires and authorises you, and all other persons to whom this warrant is addressed, to seize any property or books of the company in the possession of [name of person] and to deliver them into the custody of the Registrar to be kept by the Registrar until the Court makes an order for their disposal.

Note

Section 489A of the Corporations Act 2001 (Cth) provides that if the Court issues a section 486B warrant for a person to be arrested and brought before the Court, and the person is not in prison, then the person named in the warrant may be arrested by an officer of the police force of the State or Territory in which the person is found, the Sheriff of that State or Territory or any of the Sheriff's officers, or a member or special member of the Australian Federal Police.

Court use only	
Registrar	

Schedule

Notice issued under section 1071D(2)

Form CORP 18 Summons for Appearance in Relation to Registration of Transfer of Interests

Form CORP 18

To be inserted by Court		
Case Number:		
Date Signed:		
FDN:		
Hearing Date and Time:		
Hearing Location:		
Trouring Location.		
SUMMONS FOR AP	PEARANCE IN RELATION TO R	REGISTRATION OF TRANSFER
	OF INTERESTS	
SUPREME COURT OF SOUT	'H AUSTRALIA	
Corporations List		
IN THE MATTER OF [full name	e of corporation to which the proceeding relates and	d, if applicable, the words '(in liquidation)', '(receiver
appointed)', '(receiver and manag	rer appointed)', '(controller acting)', or '(under admir	nistration)']
ABN or ACN or ARBN: [insert A	ABN or ACN or ARBN]	
Please specify the Full Name including capacit if more than one party of the same type.	ry (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name	(if applicable) for each party. Each party should include a party number
in more than one party of the same type.		
First Applicant		
т пэт друшатт		
First Deependent		
First Respondent		
Lodging Party	Full Name (footballer Alex Konsum	
Name of law firm / solicitor	Full Name (including Also Known as, capacity (eg Administrator, Liqu	udator, Trustee) and Litigation Guardian Name (if applicable))
,	Law Firm	Solicitor

name eet Address (including unit or le	evel number and name of pro			
<u>-</u>				
		Postcode	Country	
ail address				
e - Number				
TO: the above named Person Summoned You are summoned pursuant to section 1071D of the Corporations Act 2001 (Cth) to appear before the Court at the time and place set out at the top of this document and show cause why the documents specified in the Schedule should not be [delivered up/produced] at the office of [name of company] at [address of company] within [period as ordered], as required by the attached notice.				
t	e - Number on Summoned t to section 1071D of this document an	on Summoned t to section 1071D of the Corporations of this document and show cause why	on Summoned t to section 1071D of the Corporations Act 2001 (Cth) to apport this document and show cause why the documents spec	

Schedule

Registrar

Notice issued under section 1071D(2)

Form CORP 19 Consent to Act as Designated Person

Full Name

Form CORP 19		
To be inserted by Court		
Case Number:		
Date Filed:		
FDN:		
co	ONSENT TO ACT AS DESIGNAT	TED PERSON
SUPREME COURT OF SOUT CIVIL JURISDICTION Corporations List	H AUSTRALIA	
	e of corporation to which the proceeding relates and uer appointed)', '(controller acting)', or '(under admin	f, if applicable, the words '(in liquidation)', '(receiver istration)']
ABN or ACN or ARBN: [insert A	ABN or ACN or ARBN]	
Please specify the Full Name including capacit if more than one party of the same type.	y (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name	(if applicable) for each party. Each party should include a party number
First Applicant		
First Respondent		
Lodging Party		
Name of law firm / solicitor if	Full Name (including Also Known as, capacity (eg Administrator, Liqu	idator, Trustee) and Litigation Guardian Name (if applicable))
any	Law Firm	Solicitor
Registered Liquidator		
Name of responsible officer Where body corporate	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					
	Type - Number				
Consent					
I, [name], a registered liquidator, of [address] consent to be appointed by the Court and to act as the person designated by the Court under article [19/21] of the Model Law to [administer/realise/distribute] the assets of [name of company].					
I am not aware of any conflict of interest or duty that would make it improper for me to act as the person designated by the Court.					
The time cost rates currently charged in respect of work done as the person designated by the Court by me, and by my partners and employees who may perform work in this administration, are set out below or in the Schedule attached to this Consent. [current rates – unless set out in schedule]					
I acknowledge that my appointment by the Court does not constitute an express or implied approval by the Court of these rates.					
Date: [date]					
Signature of registered liquic	 Jator				

Note

The remuneration that an external administrator is entitled to receive for necessary work properly performed by the external administrator in relation to the external administration of a company is regulated by Division 60 of the Insolvency Practice Schedule (Corporations).

Schedule

If applicable

[Description of time-cost rates]

Form CORP 20 Notice of Application for Recognition of Foreign Proceeding

NOTICE OF FILING OF APPLICATION FOR RECOGNITION OF FOREIGN PROCEEDING – CORPORATION

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List Case Number: [insert case number]

[Name of company]

ACN or ABN: [ACN or ABN of company to which proceeding relates]

TO all the creditors of [name of company]

TAKE NOTICE that:

- 1. An application under the *Cross-Border Insolvency Act 2008* for recognition of a foreign proceeding in relation to [name of company] was commenced by the applicant [name] on [date of filing of originating application] and will be heard by a Master of the Court on [date] at [time] at [address]. Copies of documents filed may be obtained from the applicant's address for service.
- 2. The applicant's address for service is [name and address of applicant's legal practitioner or, if there is no legal practitioner, address of the applicant].
- 3. Any person intending to appear at the hearing must file a notice of appearance, in accordance with the prescribed form, together with any affidavit on which the person intends to rely, and serve a copy of the notice and any affidavit on the applicant at the applicant's address for service at least 3 days before the date fixed for the hearing.
- 4. If you are a foreign creditor you must file in the registry of the Court at the address mentioned in paragraph 1 an affidavit setting out the details of any claim, secured or unsecured, which you may have against the company above at least 3 days before the date fixed for the hearing.

Date: [date]

Name of applicant or applicant's legal practitioner: [name]

Form CORP 21 Notice of Making of Order Under the Cross-Border Insolvency Act

NOTICE OF MAKING OF ORDER UNDER THE CROSS-BORDER INSOLVENCY ACT 2008

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List

[Name of company]

ABN or ACN: [ABN or ACN of company to which proceeding relates]

TO all the creditors of [name of company]

TAKE NOTICE that:

1. On [date], the Supreme Court of South Australia in case number [number], commenced by the applicant [name of applicant], made the following orders under the Cross Border Insolvency Act 2008 in relation to [name of company]:

Insert details of order in separately numbered paragraphs

1.

- 2. The applicant's address for service is [name and address of applicant's legal practitioner or, if there is no legal practitioner, address of the applicant].
- The name and address of the foreign representative is [insert name and address].
- The name and address of the person entrusted with distribution of the company's assets is [insert name and address]

Date: [date]

Name of applicant or applicant's legal practitioner: [name]

NOTICE OF DISMISSAL OR WITHDRAWAL OF APPLICATION FOR RECOGNITION OF FOREIGN PROCEEDING

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION Corporations List

[Name of company]

ABN or ACN: [ABN or ACN of company to which proceeding relates]

TO all the creditors of [name of company]

TAKE NOTICE that the application under the Cross Border Insolvency Act 2008 for recognition of a foreign proceeding in relation to [name of company] commenced by the applicant [name of applicant] on [date of filing of originating application] was [dismissed/withdrawn] on [date of dismissal/withdrawal].

Date: [date]

Name of person giving notice or of person's legal practitioner: [name]

Form CORP 23 Notice of Application to Modify or Terminate an Order for Recognition or Other Relief

NOTICE OF FILING OF APPLICATION TO MODIFY OR TERMINATE AN ORDER FOR RECOGNITION OR OTHER RELIEF

SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION
Corporations List
Case Number: [insert case number]

[Name of company]

ACN or ABN: [ACN or ABN of company to which proceeding relates]

TO all the creditors of [name of company]

TAKE NOTICE that:

- 1. An application under the Cross-Border Insolvency Act 2008 for an order [modifying/terminating] [an order for recognition of a foreign proceeding/ relief granted under article [19/21] of the Model Law] in relation to [name of company] was filed by the applicant, [name], on [date of filing of interlocutory application] and will be heard by a Master of the Court on [date] at [time] at [address]. Copies of documents filed may be obtained from the applicant's address for service.
- 2. The applicant's address for service is [name and address of applicant's legal practitioner or of applicant].
- 3. Any person intending to appear at the hearing must file a notice of appearance (if the person has not already done so), in accordance with the prescribed form, together with any affidavit on which the person intends to rely, and serve a copy of the notice (if applicable) and any affidavit on the applicant at the applicant's address for service at least 3 days before the date fixed for the hearing.

Date: [date]

Name of applicant or applicant's legal practitioner: [name]