

To be inserted by Court

Case Number:

Date Filed:

FDN:

Hearing Date and Time:**Hearing Location:**

ORIGINATING APPLICATION - LICENCE DISQUALIFICATION OR SUSPENSION (REMOVE)

Criminal Law Consolidation Act s 19AE or 19AF

[*SUPREME/DISTRICT/MAGISTRATES/YOUTH*] Select one COURT OF SOUTH AUSTRALIA
SPECIAL STATUTORY JURISDICTION

[FULL NAME]
Applicant

State of South Australia
Respondent

Duplicate panel if multiple Applicants

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			
Date of Birth and Licence No			
	Date of birth	Driver's Licence No (and State or Territory)	

Respondent	State of South Australia		
	Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))		
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 (eg. Home; work; mobile) – Number		Another number (optional)

Application Details

Matter type:

This Application is to

- ☐ remove the disqualification of the applicant from holding or obtaining a driver's licence.
- ☐ end the suspension of the applicant 's driver's licence.

This Application is made under section [19AE(6)/19AF(6)] of the Criminal Law Consolidation Act 1935.

Orders sought

- ☐ 1. That the disqualification of the applicant from holding or obtaining a driver's licence be removed .
- ☐ 2. That the suspension of the applicant 's driver's licence end.
- ☐ 3. [other].

This Application is made on the grounds that:

- exceptional circumstances exist in relation to the [Applicant/alleged offence] such that it is, in all the circumstances, appropriate that an order be made; and
- the Applicant does not pose a substantial risk to other members of the public if an order is made, as set out in detail in the accompanying Affidavit sworn by [name] on [date].

If applicable

The Application is urgent because

grounds in separately numbered paragraphs where more than one

1.

Particulars of Notice of Disqualification/Suspension

Date of Notice

date

Date of commencement of Notice

date

Disqualification Notice number

number

Brief number

number

The Applicant [has/has not] also received a Notice from the Registrar of Motor Vehicles containing particulars of the licence [disqualification/suspension].

if applicable

Hearing

The Applicant requests that the Hearing be by written submissions only, because reasons in separate numbered paragraphs

1.

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
- 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 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>.

To the Applicant: WARNING

If you drive whilst being disqualified or suspended you may be imprisoned or detained pursuant to section 91(5) of the *Motor Vehicles Act 1959*.

Service

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

Accompanying Documents

Accompanying this Application is a:

- ☐ Supporting Affidavit mandatory
- ☐ A copy of the Notice of Disqualification mandatory unless exhibited to Affidavit
- ☐ If other additional document(s) please list below: