Form 4Be

To be inserted by Court
Case Number:
Date Filed:
FDN:

ORIGINATING APPLICATION EX PARTE - INTERVENTION ORDERS ACT - DOMESTIC VIOLENCE ORDER NATIONALLY RECOGNISED

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

[*FULL NAME*]
Applicant

Applicant	**Full Name**			
Name of responsible officer **If applicable**	**Full Name**			
Responsible officer details **If applicable**	**Rank/position**		**Number/identifier**	
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	**Type (eg. home; work; mobile) – Number**		**Another number (optional)**	

Application Details

Matter type: [*Enter matter type*]

This Application is for an order declaring a Domestic Violence Order made against [*full name*] ('the Subject') to be nationally recognised.

This Application is made under section 29ZD of the *Intervention Orders (Prevention of Abuse) Act* 2009.

The Applicant seeks the following orders:
Enter orders sought in separately numbered paragraphs

☐ 1. An order declaring the Intervention Order to be a nationally recognised DVO.
☐ 2. [*Enter other*]

This Application is made on the grounds

☐ set out in the accompanying Affidavit sworn by [*full name*] on [*date*].

☐ that

Enter grounds in separately numbered paragraphs

1.

Only complete if applicable otherwise delete

The Application is urgent because

Enter grounds in separately numbered paragraphs where more than one

1.

Details of Order subject of this Application

State of issue: [*Enter state*]
Order reference number: [*Enter number*]
Court of issue: [*Enter Court*]
Date order issued: [*date*]
Date order expires: [*date*]

The order subject of this Application is a [*final/interim*] **select one** order.

The Subject

Name: [*full name*]
full name

Address: [*Enter street*]
street include unit or level number and/or name of property if necessary

[*Enter city/town/suburb*]
city/town/suburb

[*Enter state*] **state** [*Enter country*] **country: default Australia and not displayed if Australia** [*Enter postcode*] **postcode**

Other address at which the Subject may be found **optional**: [*Enter street*]
street include unit or level number and/or name of property if necessary

[*Enter city/town/suburb*]
city/town/suburb

[*Enter state*] **state** [*Enter country*] **country: default Australia and not displayed if Australia** [*Enter postcode*] **postcode**

Telephone: [*Enter phone number*]
phone no

Date of birth: [*Enter date of birth*]
date of birth

Drivers Licence number: [*Enter licence number*]
licence number

Original Applicant for Domestic Violence Order subject to this Application

Applicant: [*full name*]
full name

Responsible officer: **if applicable** [*full name*]
full name

Responsible officer details: **if applicable** [*Enter rank]* **rank** [*Enter number*] **number**

Address: [*Enter street*]
street: include unit or level number and/or name of property if necessary

[*Enter city/town/suburb*]
city/town/suburb

	[*Enter state*] **state**	[*Enter country*] **country: default Australia and not displayed if Australia**	[*Enter postcode*] **postcode**
Telephone:	[*Enter phone number*] **phone no**		

Protected person [*1*]: **provision for multiple**

Full name:	[*full name*] **name**
Date of birth:	[*Enter date of birth*] **date of birth**
Relationship to the subject at the time the foreign order was made:	☐ Partner/spouse ☐ Child ☐ Step-child ☐ Parent ☐ Step-parent ☐ Sibling ☐ Relative [*details*] ☐ Neighbour ☐ [*Other*]

Service or notification of original order

Has the order been served upon or otherwise properly notified to the Subject?

- ☐ Yes
- ☐ No

Must complete if selected 'yes' above Date [o*rder served on the Subject*] **select one** *properly notified of order*]: [*date*]

Previous Declarations

Has the order been previously declared as a Nationally Recognised Domestic Violence Order in another Australian State or Territory?

- ☐ Yes
- ☐ No

Must complete if selected 'yes' above **Details of previous declaration**

State of issue:	[*Enter state*] **state**
Order reference number:	[*Enter number*] **number**
Court of issue:	[*Enter name of Court*] **Court**
Date order issued:	[*date*] **date**
Date order expires:	[*date order expires*] **date**

Addressing a Domestic Violence Concern

Does the Domestic Violence Order clearly state it addresses a domestic violence concern?

- ☐ Yes
- ☐ No

Must complete if selected 'no' above

Reasons the order should be declared as a Nationally Recognised Domestic Violence Order

[*Enter reasons*]

Accompanying Documents

Accompanying this Application is a:

☐ Supporting Affidavit **optional**
☐ Copy of Domestic Violence Order **mandatory**
☐ Copy of Certificate of Proper Notification of Domestic Violence Order
☐ If other additional document(s) please list below: