

**FORM 65**  
**QUEENSLAND**  
*Penalties and Sentences Act 1992*  
*(Part 3A)*  
*Penalties and Sentences Regulation 1992*

**APPLICATION TO AMEND/REVOKE A NON-CONTACT ORDER**

Court:  
Place:  
Offender

I \_\_\_\_\_ of \_\_\_\_\_  
apply to the \_\_\_\_\_ Court for an order to amend/revoke the non-contact order against the  
abovenamed offender. I am eligible to make this application.

**Details of non-contact order to be amended/revoked:**

1. The Court, place and date the order was made:
2. Name of person(s) protected by the order:
3. Requirements of the non-contact order:

4. Reasons for amendment/revocation:

5. \*Requirements to be amended:

\* Need only be completed for amendment to the non-contact order, not to be completed for revocation.

***Notice to Applicant:***

1. *If the applicant is the offender, victim or an associate of the victim stated in the non-contact order, a copy of the application must be given to the prosecuting authority at least 21 days before the day on which the application is to be heard.*
2. *If the applicant is a prosecutor, a copy of the application must be given to the offender, victim and any associate named in the order at least 21 days before the hearing.*
3. *This application can be made by a Crown Prosecutor; a police officer; the victim named in the order; an associate of the victim who is named in the order; or the offender who is the subject of the order*

Applicant or applicant's lawyer  
Date:  
Place:

**TO:** The Prosecutor, the victim, all associates named in the order and to the offender

**TAKE NOTICE: This application will be heard at:**

**Court:**  
**Place:**  
**Date:**  
**Time:**

**You have the right to attend and be heard at the hearing of this application.**

Sheriff/Registrar/Clerk of the Court  
Date:  
Place: