FORM DV4

Domestic and Family Violence Protection Act 2012 (s.86)

Application to vary a domestic violence order

Please note: a copy of this application will be provided to the aggrieved, applicant, respondent and police

| 1. Aggrieved's Details | | | | |
|---|------------------------------|-----------------------------------|------------------------|-----------------------|
| If the aggrieved does not want the r | espondent to know their ho | me address please eit | her: | |
| Give an address where court de | | | | |
| Complete an "Aggrieved Detail | - | rovided to the respond | | |
| Given Name | Family Name | | Date of Birth | Gender |
| | | | | |
| Address *leave blank if you do not | want this information to be | given to the other pa | nrty | |
| | | | | |
| SPI# (QPS Only) | Phone Number | Email addres | S | |
| | | | | |
| | | | | |
| | | | | |
| Do you require an interpreter? | No Yes Languag | e/Dialect: | | |
| Do you identify as: Aboriginal | Torres Strait Islander | Aboriginal and Tori | es Strait Islander | Neither |
| Do you have a disability, illness or imp | airment where support and/or | special arrangements a | are required? | Yes |
| | | opeena an angemena i | | |
| Is the aggrieved under 18 years of age Please supply the details of a parent a | | n to the parent of the ac | arieved unless the co | urt orders otherwise. |
| Parent's Name | | ····· ··· ··· ··· ··· ··· ··· ··· | | |
| | | | | |
| Parent's Address | | | | |
| | | | | |
| 2. Respondent's Details- | | | | |
| Given Name | Family Name | | Date of Birth | Gender |
| | | | | |
| Address | | | | |
| | | | | |
| | | | | |
| SPI# (QPS Only) | Phone Number | Email addres | S | |
| | | | | |
| | | | | |
| Does the Respondent require an inter | preter? No Yes L | anguage/Dialect: | | |
| Does the respondent identify as: | Aboriginal Torres Stra | it Islander 📃 Aborig | inal and Torres Strait | Islander Neither |
| Do you have a disability, illness or imp | airment where support and/or | special arrangements a | are required? | Yes |
| , | · | opeena an angemena i | | |
| Current place of employment | Vehicle Model | | Vehicle | Registration |
| | | | | |
| | | | | |
| Is the respondent under 18 years of a Please supply the details of a parent a | ge? No Yes | n to the parent of the ac | arieved unless the co | urt orders otherwise |
| Parent's Name | | | | |
| | | | | |
| Parent's Address | | | | |
| | | | | |

Applicant's Dotails ^

| | Family | Name | | ate of Birth | Gender |
|--|---|-----------------------------|------------------|-------------------|-----------------------------|
| | | | | | |
| ddress *leave blank if you do not v | want this information to | o be given to the other pa | arty | | |
| hone Number | Email address | | | | |
| | | | | | |
| | | | | | |
| o you require an interpreter? | No Yes | Language/Dialect: | | | |
| o you identify as: Aboriginal | I Torres Stra | it Islander Abo | riginal and Tor | res Strait Island | der Neither |
| o you have a disability, illness or ir | mpairment where sup | port and/or special arran | gements are re | quired? | No Yes |
| Vhat type of applicant are you? | | | | | |
| Respondent in the existing order | | | | | |
| person being authorised by the ag | | - | | | |
| person acting under another Act f | | oondent or a named pers | on 🛄 | | |
| named person in the existing orde | 31 | | | | |
| eart B – A Police Officer full Name including Rank: | | | | | Registration # |
| 5 | | | | | |
| | | | | | |
| tation | | | ۲ ٦ [| olice Occurren | ce # |
| | | | | | |
| las the aggrieved been advised of | this application? No | Yes | | | |
| Proceed to Question 4 | - | | | | |
| - Endetine a Onder Deteile | | | | | |
| . Existing Order Details | | | | | |
| ease provide a copy of the original | l order with this applic | ation. If you are unable to | o do so, court r | egistry staff wil | l obtain a copy on your bel |
| | | tion order | | | |
| the existing order: | | lion order | | | |
| A temporary protection order | | | re the original | ordor waa maa | la ar dealarad |
| | | Court and location whe | ere the original | order was mad | le or declared |
| A temporary protection order | | | ere the original | order was mac | le or declared |
| A temporary protection order | blared | Court and location whe | | | |
| A temporary protection order Date the original order made or dec | blared | Court and location whe | | | |
| A temporary protection order Date the original order made or dec | by a court or police offi efore 25/11/2017 No | Court and location whe | November 201 | 7 is automatica | lly a nationally recognised |
| A temporary protection order Date the original order made or dec my domestic violence order made b omestic violence order. A) Was the existing order made be lf you want the DVO to be national | by a court or police offi efore 25/11/2017 No ionally recognised, you | Court and location whe | November 201 | 7 is automatica | lly a nationally recognised |
| A temporary protection order Date the original order made or dec my domestic violence order made b omestic violence order. A) Was the existing order made be lf you want the DVO to be nation recognised order. | by a court or police offi efore 25/11/2017 No ionally recognised, you | Court and location whe | November 201 | 7 is automatica | lly a nationally recognised |
| A temporary protection order Date the original order made or dec ony domestic violence order made b omestic violence order. A) Was the existing order made be If you want the DVO to be national recognised order. B) Do you want to apply to declare | by a court or police offi efore 25/11/2017 No ionally recognised, you | Court and location whe | November 201 | 7 is automatica | lly a nationally recognised |

Give reasons

| В | B) Do you want to vary the duration of the order? | No | Yes | | |
|---|---|----|-----|---|--|
| | When would you like the order to and? | | |] | |

| when would you like the order to end? | |
|---------------------------------------|--|
| Give reasons | |
| | |

C) Do you want to vary the persons named in the order? No Provide details of the persons named in the order that you would like removed or added

| Full Name | Gender | Date of Birth | Address | SPI # (QPS only) |
|-----------|--------|---------------|---------|------------------|
| | | | | |
| | | | | |
| | | | | |

Yes

Give reasons

| | |
|------|------|
| | |
| | |
| | |
| | |

Proceed to Question 6

6. Temporary Protection Order

Do you wish the court to make a temporary protection order? No Yes If you request a temporary protection order before the respondent has been given a copy of the application, you will have to show the court that there are reasons why it is necessary or desirable for you or a named person to be protected by a temporary protection order before the respondent is given a copy of the application.

Please state reasons below (attach extra pages if necessary):

| | | |
|------|------|--|
| | | |
| | | |
| | | |

Proceed to Question 7

7. Details of any other Orders

Has the court made any other order or are there other court proceedings that involve the aggrieved and the respondent? Please provide a copy of the original order with this application. If you are unable to do so, court registry staff will obtain a copy on your behalf

| Childrens Court Orders | Yes | No | |
|--|-----|----|--|
| Police Protection Notice | Yes | No | |
| Intervention Order | Yes | No | |
| Interstate Domestic Violence Orders (including New Zealand) | Yes | No | |
| Family Court Orders | Yes | No | |
| Other relevant court order Domestic and Family Violence Protection Act 2012 DFVPA - Form DV4 – Application to vary a Protection Order - version 7 – approved on 23 June 2023 | Yes | No | |

8. Statutory Declaration -

[If this statutory declaration is being declared in accordance with the Oaths Act 1867 requirements before a special witness (either remotely and/or using electronic signature/s) DO NOT USE the content below. INSTEAD use DV Form 01E Special Witness Statutory Declaration for DV forms] *delete these instructions

The applicant, except if a member of the Queensland Police Service, must sign this application in the presence of a Justice of the Peace, Commissioner for Declarations, or a Solicitor

| I, | | th | e applicant, do solemnly an | d sinc | cerely dec | lare that |
|---|--|----------------------|---|----------------|-----------------------|--------------|
| the contents of this application are true and I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the <i>Oaths Act 1867</i> . | | | | | | |
| • | on who provides a false matter in a declaration | commits | an offence. | | | |
| Declared by | | at | QUEENSLAND | on | / | /20 |
| | [insert full name of declarant] | · | | | | |
| | Signature of declarant | * | | | | |
| In the presence of | | | | on | / | /20 |
| | [insert full name of witness] | [insert | type of witness]. ¹ | | | |
| | | | | * de | lete if not | applicable |
| | [insert name of law practice / witness's place of | of employ | yment]*.2 | | | |
| | | | | | | |
| | Signature of witness | × | | | | |
| have not bee the applicatio | g for a temporary protection order before the re n able to have my statutory declaration witness n. I am submitting an unverified application and an be decided. <i>(This option is not available if yo</i> | ed as reo am awai | quired under the <i>Oaths Act</i> re that my application will ne | 1867 eed to | due to the be verifie | e urgency of |
| Queensland Police S | ervice Applicant | | | | | |
| The applicant, if a me | ember of the Queensland Police Service, mu | st sign t | this application and provid | de the | e details l | below: |
| Full Name and Rank: | | | | | | |
| Registration No: | | | | | | |
| Signature: | | | | | | |
| Date: | | | | | | |
| | | | | | | |

Notes to the respondent

If you do not appear in court a domestic violence order may be made in your absence. The court may issue a warrant for you to be taken into custody by a police officer and brought before the court if the court believes that it is necessary for you to be heard.

Office Use Only

Court file number (if known) :

| YOU ARE NOTIFIED that this application will be heard at the time and place as follows: | |
|--|---|
| Court: | |
| Place: | |
| Date: | |
| Time: | |
| | , |
| Signature Clerk of the Court/Queensland Police Service | |

The footnotes are to assist in the completion of the form and can be deleted once complete.

Explanatory guides relating to making a statutory declaration in Queensland are available at <u>Statutory Declaration Forms - Datasets | Publications | Queensland Government</u>.

² For example, the name of the law practice for the Australian legal practitioner, the name of the government department of the government legal officer, the name of the law practice for a justice of the peace who witnesses documents for a law practice, etc.

¹ Insert the witness's capacity that makes them eligible to witness the statutory declaration, including as a special witness under section 16C or part 6A of the *Oaths Act 1867*. For example, Australian legal practitioner, lawyer, justice of the peace, commissioner for declarations, notary public, a justice of the peace or commissioner for declarations approved by the Chief Executive under section 12(2) of the *Oaths Act 1867*, government legal officer, etc.