

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 respondent to know their contact details please either:

- Give an address where court documents can be sent e.g. post office box or legal representative's address; or
- Complete a "DV01C – Confidential Contact Details Form" which will not be provided to the respondent

Given Name

Family Name

Date of Birth

Gender

Address *leave fields marked with an * blank and complete a Form DV01C if you do not want this information to be given to the other party

SPI# (QPS Only)

Phone Number*

Email address*

Do you require an interpreter? No Yes Language/Dialect:

Do you identify as: Aboriginal Torres Strait Islander Aboriginal and Torres Strait Islander Neither

Do you have a disability, illness or impairment where support and/or special arrangements are required?

No Yes

Is the aggrieved under 18 years of age? No Yes

Please supply the details of a parent as all documents must be given to the parent of the aggrieved unless the court 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 address

Does the Respondent require an interpreter? No Yes Language/Dialect:

Does the respondent identify as: Aboriginal Torres Strait Islander
Aboriginal and Torres Strait Islander Neither

Do you have a disability, illness or impairment where support and/or special arrangements are required?

No Yes

Current place of employment

Vehicle Model

Vehicle Registration

Is the respondent under 18 years of age? No Yes

Please supply the details of a parent as all documents must be given to the parent of the aggrieved unless the court orders otherwise.

Parent's Name

Parent's Address

3. Applicant's Details

Part A - Any other applicant who is not the Aggrieved or a member of the Queensland Police Service

Given Name

Family Name

Date of Birth

Gender

Address **leave blank if you do not want this information to be given to the other party*

Phone Number

Email address

Do you require an interpreter? No Yes Language/Dialect:

Do you identify as: Aboriginal Torres Strait Islander

Aboriginal and Torres Strait Islander Neither

Do you have a disability, illness or impairment where support and/or special arrangements are required?

No Yes

What type of applicant are you?

Respondent in the existing order

A person being authorised by the aggrieved (please provide proof of authorisation)

A person acting under another Act for the aggrieved, respondent or a named person

A named person in the existing order

Part B – A Police Officer

Full Name including Rank:

Registration #

Station

Police Occurrence #

Has the aggrieved been advised of this application? No Yes

Proceed to Question 4

4. Existing Order Details

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

Is the existing order:

A temporary protection order

A protection order

Date the original order made or declared

Court and location where the original order was made or declared

Any domestic violence order made by a court or police officer in Australia from 25 November 2017 is automatically a nationally recognised domestic violence order.

A) Was the existing order made before 25/11/2017 No Yes

If you want the DVO to be nationally recognised, you will be required to make an application to declare the DVO to be a nationally recognised order.

B) Do you want to apply to declare the order to be a recognised interstate order? No Yes

Proceed to Question 5

5. Details of Variation

A) Do you want to vary the conditions of the order? No Yes

Please provide details of the condition/s that you would like added or varied.

Give reasons

B) Do you want to vary the duration of the order? No Yes

When would you like the order to end?

Give reasons

C) Do you want to vary the persons named in the order? No Yes

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) |
|-----------|--------|---------------|---------|------------------|
| | | | | |
| | | | | |
| | | | | |

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 <input type="checkbox"/> | No <input type="checkbox"/> |
| Police Protection Notice | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Intervention Order | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Interstate Domestic Violence Orders (including New Zealand) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Family Court Orders | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Other relevant court order | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

8. Statutory Declaration

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, a Solicitor or special witness as defined by the *Oaths Act 1867* (if applicable).

I, the applicant, do solemnly and sincerely declare 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 *Oaths Act 1867*.

I understand that a person who makes a declaration that the person knows is false in a material particular commits an offence.

I state that: (**delete whichever statements are not applicable*)

- A. This declaration was made in the form of an electronic document.*¹
- B. This declaration was electronically signed.*²
- C. This declaration was made, signed and witnessed under part 6A of the *Oaths Act 1867*.*³

Declared by at on /

[insert full name of declarant]

Signed for and at the direction of the declarant by* (*delete if not applicable*)

[insert full name of substitute signatory]*

Signature of declarant / substitute signatory*

✕

[Australian legal practitioner/government legal officer/
employee of the Public Trustee, as applicable]*4
(*delete if not applicable)

In the presence
of

[insert full name of witness]

[insert type of witness]⁵

on

/ /20

[witness's place of employment /employment address /
home address / telephone number / email address / law
practice, as applicable]*6

Signature of witness

x

I am applying for a temporary protection order before the respondent has been served with a copy of the application and have not been able to have my statutory declaration witnessed as required under the *Oaths Act 1867* due to the urgency of the application. I am submitting an unverified application and am aware that my application will need to be verified before the application can be decided. (*This option is not available if you are the respondent to the protection order*)

For special witnesses or other prescribed persons to complete- Tick as applicable

I am a special witness or another prescribed person under the *Oaths Act 1867*.
(see sections 12, 16C and 31S of the *Oaths Act 1867*)

This document was made in the form of an electronic document.⁷

I electronically signed this document.⁸

This statutory declaration was made, signed and witnessed under part 6A of the *Oaths Act 1867* – I understand the requirements for witnessing a documentary by audio visual link and have complied with those requirements.⁹

Queensland Police Service Applicant

The applicant, if a member of the Queensland Police Service, must sign this application and provide the details 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: <input type="text"/> |
| Place: <input type="text"/> |
| Date: <input type="text"/> |
| Time: <input type="text"/> |
| 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 Statutory Declaration Forms - Datasets Publications Queensland Government . |
|--|--|

¹ Include this statement if you electronically signed the document, or if you physically signed the document over audio visual link and then sent a scanned copy of that document to the witness.

² Include this statement if you or your substitute signatory electronically signed the document using an accepted method under the *Oaths Act 1867*. Do not include this statement if you signed the document on paper.

³ Include this statement if the document was made over audio visual link.

⁴ Substitute signatory to include additional information if directed over audio visual link. A person may be directed by audio visual link to sign a document for a signatory only if the person is: an Australian legal practitioner; or a government legal officer under the *Legal Profession Act 2007* (who is an Australian lawyer but not an Australian legal practitioner and witnesses documents in the course of the government work engaged in by the officer); or is an employee of the public trustee (s 31P, *Oaths Act 1867*).

⁵ 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.

⁶ Legal practitioners who witness this document as a special witness must include their law practice (s 13E, *Oaths Act 1867*). If you are not an Australian legal practitioner or an approved JP or Cdec, at least one of the following must be included on the document: the name of your place of employment, your employment or home address, your telephone number or your email address. If there are concerns about domestic, family or sexual violence, you should use your discretion and include the information (from the options listed) that minimises the risk of exposing the location of the signatory or other affected persons.

⁷ Tick this box if you electronically signed the document or if you physically signed the document and sent a scanned copy of that document to the signatory.

⁸ Tick this box if you electronically signed the document using an accepted method under the *Oaths Act 1867*. Do not tick this box if you signed the document on paper.

⁹ Tick this box if the document was made over audio visual link.