**FORM DV1**

Domestic and Family Violence Protection Act 2012 (s.32)

**Application for a Protection 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 home address please either:**

* **Give an address where court documents can be sent e.g. post office box or**
* **Complete an “Aggrieved Details Form” which will not be provided to the respondent**

Given Name/s Family Name Date of birth

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

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 Gender Home Number Mobile Number

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 Work Phone Email SPI # (QPS Only)

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

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

Does the aggrieved 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 a parent of the aggrieved unless the court orders otherwise.

Parent’s Name

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Parent’s Address

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**Proceed to Question 2**

**2. Respondent’s Details**

Given Name/s Family Name Date of birth

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Address

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 Gender Home Number Mobile Number

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 Work Phone Email SPI # (QPS Only)

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 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

Does the respondent have a disability, illness or impairment where support and/or special arrangements are required? No Yes

 Current place of employment Vehicle Model: Vehicle Registration

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Is the respondent under 18 years of age? No Yes

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

Parent’s Name

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Parent’s Address

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**If you are the aggrieved, proceed to Question 4**

**If you are not the aggrieved proceed to Question 3**

**3. Applicant’s Details**

This section only applies if a person other than the aggrieved is making the application. Please complete either Part A, B, C or D.

**PART A – A person being authorised by the Aggrieved**

Given Name/s Family Name Gender

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

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 Is the authorisation of the aggrieved in writing? No Yes

If the authorisation is not in writing, how is authorisation communicated from the aggrieved?

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**PART B – A person acting under another Act for the Aggrieved**

Name Gender

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Address

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Who is the application being made by? A guardian Adult Guardian Enduring power of attorney

Other, please specify:

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**PART C – A Police Officer**

Full Name including Rank: Registration #

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 Station Police Occurrence #

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Has the aggrieved been advised of this application? No Yes

Has the application resulted from the detention of the respondent? No Yes

Is this an application for an urgent temporary protection order under section 130? No Yes

If yes, has an application for a domestic violence order already been made? No Yes Court File Number:

**PART D – A party to a child protection proceeding**

Given Name/s Family Name Gender

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Address

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What type of party to a child protection proceeding are you?

A child for whom an order is sought in a child protection proceeding

A separate legal representative for a child for whom an order is sought in a child protection proceeding

An applicant or respondent in a child protection proceeding

**Proceed to Question 4**

**4. 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)*:

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**Proceed to Question 5**

**5. Relationships between the aggrieved and the respondent**

What is the relationship of the aggrieved to the respondent?

 **Intimate Personal Relationship –** Please tick one

 a) *Spousal Relationship*: Married Former Spouse De Facto Civil Partnership

 Parent/Former Parent of a Child

 b) Engaged Were Engaged

 c) Couple State the nature of the relationship including the level of dependency on each other whether financial or otherwise; length of time of the relationship; frequency of contact and degree of intimacy, if any.

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 **Family Relationship**

Relation to respondent (for example parent, sibling, aunt, cousin, stepchild, a person is regarded as a relative)

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 **Informal Care Relationship**

Nature of relationship

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**Proceed to Question 6**

**6. Grounds for a protection order**

State grounds as to why a protection order is necessary or desirable to protect the aggrieved. It must be shown that domestic violence has occurred. Include specific example of behaviour by the respondent. *Attach extra pages if necessary*

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**Proceed to Question 7**

**7. Children of the aggrieved or children who usually live with the aggrieved**

Full Name of **Child 1** Gender Date of birth

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Address

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Do you wish this child to be named on the order? No Yes SPI # (QPS Only)

Full Name of **Child 2** Gender Date of birth

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Do you wish this child to be named on the order? No Yes SPI # (QPS Only)

Full Name of **Child 3** Gender Date of birth

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Do you wish this child to be named on the order? No Yes SPI # (QPS Only)

State grounds as to why the child/children are to be named on the order

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**Proceed to Question 8**

**8. Relatives or associates you would like to be named on the order**

Full Name of **Relative** Gender Date of birth

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Address SPI # (QPS only)

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Full Name of **Relative** Gender Date of birth

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Address SPI # (QPS only)

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Full Name of **Associate** Gender Date of birth

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Address SPI # (QPS only)

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Full Name of **Associate** Gender Date of birth

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Address SPI # (QPS only)

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State grounds as to why it is necessary or desirable to protect the relative/associate.

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**Proceed to Question 9**

**9. Weapons and explosives**

Does the respondent have access to any weapons or explosives? No Yes

State the number, type of weapon/s or explosives and all possible locations of the weapon and explosives

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Did the respondent use, or threaten to use an explosive, a weapon or another thing used as a weapon, during any incident of domestic violence?

No Yes Provide details

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Has the respondent been issued with a weapons or firearms or explosives licence? No Yes

If the respondent has access to any weapons, ammunition or explosives at their place of residence, please provide details

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**Proceed to Question 10**

**10. Details of any other orders**

Has a court made any other order or are there other court proceedings that involve the aggrieved and the respondent? *Please attach copies*

Childrens Court orders Yes No

Queensland Domestic Violence Order Yes No

Police Protection Notice Yes No

Voluntary Intervention Order Yes No

Interstate Domestic Violence Order (including New Zealand) Yes No

Family Court Orders Yes No

Other relevant court order Yes No

Is there a current Protection Order application that has not been decided by the court? No Yes Attach a copy of the application

**Proceed to Question 11**

**11. Conditions sought in the order**

A court making a domestic violence order must impose a condition that the respondent –

Be of good behaviour towards the aggrieved and not commit domestic violence against the aggrieved.

If the order includes a named person who is an adult-

Be of good behaviour towards the named person and not commit associated domestic violence against the named person.

If the order includes a named person who is a child -

Be of good behaviour towards the child and not commit associated domestic violence against the child and not expose the child to domestic violence.

A court may also impose any other condition that the court considers necessary in the circumstances and desirable in the interests of the aggrieved, any named person or the respondent.

**Do you want the court to consider any other conditions for inclusion in the protection order?**

No Go to Q12 Yes Please indicate below

 A) Do you want the respondent to leave specified premises? No Yes

 If yes, state address of premises and provide reasons­­­­­­­­­­­:

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B) Do you want to prohibit the respondent from remaining at; entering or attempting to enter or approaching premises? No Yes

 If yes, the premises to which the respondent is not to come or approach are:

 The aggrieved’s place of residence The aggrieved’s place of employment The place the aggrieved is currently staying

 Places where the aggrieved frequents, namely

 Associates/relatives place of residence (if there is a named person at Question 8)

 Give reasons

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C) Do you want to prohibit the respondent approaching the aggrieved? No Yes

 Does this include any associates or relatives (if there is a named person at Question 8)?

 Give reasons

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D) Do you want to prohibit the respondent from contacting the aggrieved or asking someone else to contact the aggrieved? No Yes

 Does this include any associates or relatives (if there is a named person at Question 8)? No Yes

 Give reasons

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E) Do you want to prohibit the respondent’s presence at or in a place associated with any child *(e.g. school, day care etc)* No Yes

 Give reasons

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F) If the respondent does not know the aggrieved’s whereabouts, do you want to prohibit the respondent from trying to locate them or asking someone else to locate them? No Yes

 Give reasons

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G) Does the aggrieved wish to recover essential property? No Yes

 Describe the property and state address where this property can be located.

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H) Do you want the court to consider prohibiting any other conduct or behaviour on the part of the respondent? No Yes

 Specify that conduct or behaviour complain of and give reasons

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**12. 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, the applicant do solemnly and sincerely declare 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 provides a false matter in a declaration commits an offence.

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| 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]](#endnote-1) |  |  |
|  |  | *\* delete if not applicable* |
|  | [insert name of law practice / witness’s place of employment]\*[[2]](#endnote-2) |  |  |
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| Signature of witness  | *🗶* |

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| 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. |

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| **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:  |  |

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| **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. |

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| **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 [Statutory Declaration Forms - Datasets | Publications | Queensland Government](https://www.publications.qld.gov.au/dataset/statutory-declaration).

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. [↑](#endnote-ref-1)
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. [↑](#endnote-ref-2)