

# LICENSING COURT OF SOUTH AUSTRALIA

## PRACTICE DIRECTION NO. 12

### NEW AND UPDATED FORMS

**I, Brian Patrick Gilchrist, the Licensing Court Judge, by virtue of the provisions of section 16A of the Liquor Licensing Act 1997 and Rule 8 of the Licensing Court Rules 2012 do hereby make the following Practice Direction.**

With the commencement of the Court's new case management system the forms of the Court have been duly updated. Accordingly, all such forms are to be filed electronically in accordance with the following approved documents:

#### **Initiating Applications:**

- Review of or an Appeal from the Commissioner's Decision
- Complaint and Summons (ie. Disciplinary)
- Referral from the Commissioner
- General Application (ie. Injunction)

#### **General Forms:**

- Affidavit
- Application for Directions
- Details of Additional Party
- Certificate of Service
- Notice of Discontinuance
- Notice of Intention to Intervene
- Notice of Objection
- Notice of Withdrawal
- Notice of Change of Address for Service or Representation
- Summons to Attend and or Produce documents or things

The clerk may at his/her absolute discretion resolve to receive these documents in paper form notwithstanding this direction.

These forms are now available to download from our website – [www.licensingcourt.sa.gov.au](http://www.licensingcourt.sa.gov.au)

**Dated this 30<sup>th</sup> day of June 2022**



**Judge Brian Gilchrist  
The Licensing Court Judge**





# APPLICATION FOR REVIEW OF OR AN APPEAL FROM THE COMMISSIONER'S DECISION

## Licensing Court of South Australia

*Liquor Licensing Act 1997 (s 22); Gaming Machines Act 1992 (s 69); Casino Act 1997 (s 65); Authorised Betting Operations Act 2000 (s 77)*

Court File Number (Internal Use Only)

Details of previous application lodged and determined by the Commissioner which is now to be reviewed or appealed

Application Number

License Number (if applicable)

Premises Name (if applicable)

Premises Address (if applicable - actual or proposed)

Applicant Name

Application Type

Date of Commissioner's Decision *\*If the Commissioner's decision and/or order is in writing, please attach a copy.*

### Instructions for the Applicant:

- 1 This form (with a copy for each other party to the application) must be filed with the Court at the address below.
- 2 An application seeking a review of the Commissioner's decision under the *Liquor Licensing Act 1997, Casino Act 1997 and Authorised Betting Operations Act 2000* or an appeal from a party to proceedings before the Commissioner under the *Gaming Machines Act 1992*, must make such an application **within the time prescribed by the relevant Act** or a longer period allowed by the Court. **If an extension of time** is sought the application must be accompanied by an **Application for Directions** seeking the extension of time together with a supporting **Affidavit**.
- 3 The Court will issue a Notice as to the date/time for a **directions hearing** of the application.
- 4 The applicant must serve a copy of this form and the hearing Notice on the Commissioner and upon all other relevant parties within 14 days.
- 5 After service, the applicant must complete the attached *Certificate of Service* in respect of each party served.
- 6 The completed *Certificate of Service* must be filed with the Court before the hearing.

Tel: (08) 8207 0954

Email: [licensingcourt@sa.gov.au](mailto:licensingcourt@sa.gov.au)

**RELIEF SOUGHT**

*State the terms of the decision that you seek to have reviewed or are appealing and the grounds in support thereof.*

[Large empty rectangular box for text entry]

**Signature of Person Lodging the Form**

[Empty rectangular box for signature]

**Date**

[Empty rectangular box for date]



## ATTACHMENT 1 - PARTIES (detail)

### A. Applicant

Individual

Organisation – specify

#### Contact details

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Job title <input type="text"/>			
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Do you require an interpreter? <input type="checkbox"/> No <input type="checkbox"/> Yes – specify language / dialect		Do you have any other special requirements? <input type="checkbox"/> No <input type="checkbox"/> Yes – specify requirements	
<input type="text"/>		<input type="text"/>	

#### Applicant representative details

Are you represented?

Yes  No – go to *B Other Parties*

Type of representative

Legal  Employer association  Advocate

Is the representative an individual or acting on behalf of a representative organisation?

Individual

Organisation – specify

#### Representative contact details

Title	Given name	Family name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

## B. OTHER PARTIES

### Other Party #1

Other Party is the:  Intervenor  Objector  Other

Other Party is an:

Individual

Organisation – specify

#### Contact details

Title	Given name	Family name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Job title				
<input type="text"/>				
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb		State	Postcode	
<input type="text"/>		<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

### Other Party #2

Other Party is the:  Intervenor  Objector  Other

Other Party is an:

Individual

Organisation – specify

#### Contact details

Title	Given name	Family name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Job title				
<input type="text"/>				
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb		State	Postcode	
<input type="text"/>		<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

If there are more parties to this application than this form provides for, please complete and submit an 'AL10 - Details of Additional Party' form for all other parties, available from [www.licensingcourt.sa.gov.au](http://www.licensingcourt.sa.gov.au).

File No:

**CERTIFICATE OF SERVICE**

Name of certifier:

Address of certifier:

Name of person/organisation served:

Address at which service effected:

Date service effected:

Time of day:

Between:

Start time am/pm

Finish time am/pm

**Method of service** (tick box)

- personally to:
- leaving it at the licensed premises in an envelope addressed to the licensee with a person apparently employed or engaged in the business conducted under the licence.
- by posting it to the licensee in an envelope addressed to the licensee at the licensed premises or some other appropriate address of which the person who is to serve the notice or document has had notice.
- by leaving it at or posting it to a nominated address in an envelope addressed to the person.
- by posting it to the person's usual place of business or residence in an envelope addressed to that person.
- by leaving it at or posting to the address of the person's (not being the licensee) solicitor in an envelope.
- any other method permitted by the relevant Act and the Rules – specify:

Signature

I certify that I served the attached document in the manner described.

Certified this day:



# COMPLAINT AND SUMMONS

Licensing Court of South Australia

Section 120 Liquor Licensing Act 1997

Court File number (Internal Use Only)

## PARTIES (SUMMARY) **DO NOT COMPLETE PART A**

This section will **auto-populate** with details you provide in Attachment 1 - Parties (Detail) (enclosed at the end of this form) which **must** be completed prior to lodgement.

### A. Parties Summary

Name (Party type)

Contact's last name

#### Complainant

*Representative  
(if applicable)*

#### Respondent #1

*Responsible Person  
Approval number (if  
applicable):*

#### Respondent #2 (if applicable)

*Responsible Person  
Approval number (if  
applicable):*

**Important notice to Respondent:** This is a **Summons** to appear on the **hearing date set out below**. If you fail to appear on the day or on any day to which this matter is adjourned the Court may:-

- proceed in your absence; **or**
- adjourn the matter to another date.

**HEARING  
DETAILS:** Licensing Court of South Australia  
7<sup>th</sup> Floor, Riverside Centre  
North Terrace, Adelaide

**On:**

**At:**

**Clerk of the Licensing Court of SA**

**Tel:** (08) 8207 0954

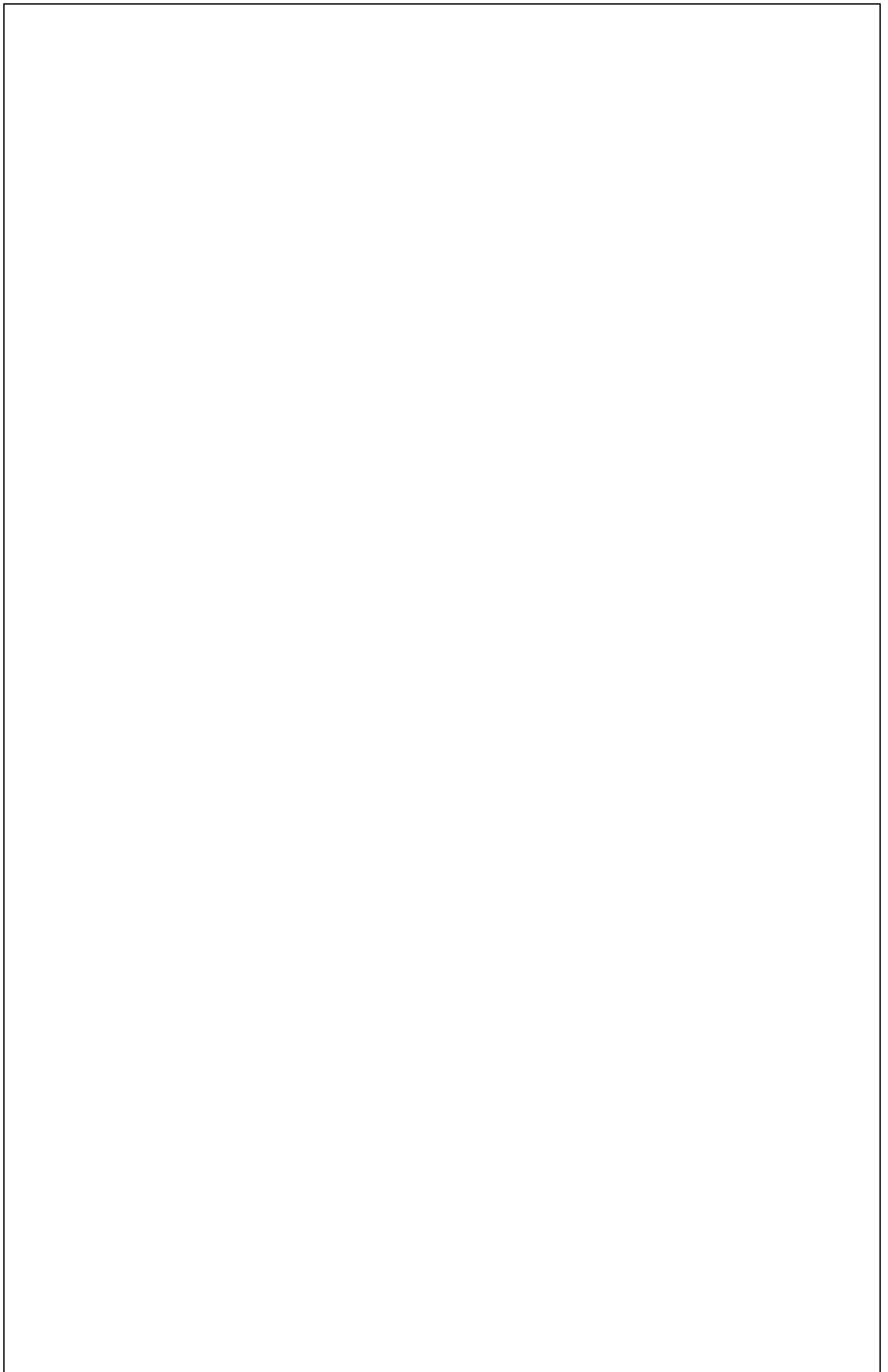
**Email:** [licensingcourt@sa.gov.au](mailto:licensingcourt@sa.gov.au)

## B. Grounds of Application

**Grounds upon which disciplinary action is sought:**

*\*Add additional pages if required*





Large empty rectangular box for the main content of the document.

**Complainant's signature**

Empty rectangular box for the complainant's signature.

**Date**

Empty rectangular box for the date.

**ATTACHMENT 1 – PARTIES (details)**

**A. Complainant**

Organisation name

**Contact details**

Title  Given name  Family name

Job title

Unit number  Street number  Street name / PO Box  Street type (eg Street, Road, Drive)

Suburb  State  Postcode

Phone  Mobile  Email

**Complainant representative details (if applicable)**

Are you (the Complainant) represented?

Yes     No – go to *B Respondent(s)*

**Representative contact details**

Organisation name

Title  Given name  Family name

Unit number  Street number  Street name / PO Box  Street type (eg Street, Road, Drive)

Suburb  State  Postcode

Phone  Mobile  Email

**B. Respondent(s)**

**Respondent #1**

Respondent is the:       Licensee       Responsible Person       Other

Responsible Person approval number (if applicable)

Respondent is an:

Individual       Organisation – specify

Organisation legal name

Organisation trading name

**Contact details**

Title      Given name      Family name  
           

Job title

Unit number      Street number      Street name / PO Box      Street type (eg Street, Road, Drive)  
                 

Suburb      State      Postcode  
           

Phone      Mobile      Email  
           

**Respondent #2**

Respondent is the:       Licensee       Responsible Person       Other

Responsible Person approval number (if applicable)

Respondent is an:

Individual       Organisation – specify

Organisation legal name

Organisation trading name

**Contact details**

Title      Given name      Family name  
           

Job title

Unit number      Street number      Street name / PO Box      Street type (eg Street, Road, Drive)  
                 

Suburb      State      Postcode  
           

Phone      Mobile      Email  
           

If there are more parties to this application than this form provides for, please complete, and submit an 'AL10 - Details of Additional Party' form for all other parties, available from [www.licensingcourt.sa.gov.au](http://www.licensingcourt.sa.gov.au).

**C. Licensed Premises (if applicable):**

If this application relates to a Licensed Premises, please complete the below information:

Licensed Premises  
Information:  
(if applicable)

Licence description
Licence Number
Name of Licensed Premises
Address of Licensed Premises

**LICENSING COURT OF SOUTH AUSTRALIA**

**File No:**

**CERTIFICATE OF SERVICE**

Name of certifier:

Address of certifier:

Name of person/organisation served:

Address at which service effected:

Date service effected:

Time of day:

Between:

Start time am/pm

Finish time am/pm

**Method of service** (tick box)

- personally to:
- leaving it at the licensed premises in an envelope addressed to the licensee with a person apparently employed or engaged in the business conducted under the licence.
- by posting it to the licensee in an envelope addressed to the licensee at the licensed premises or some other appropriate address of which the person who is to serve the notice or document has had notice.
- by leaving it at or posting it to a nominated address in an envelope addressed to the person.
- by posting it to the person's usual place of business or residence in an envelope addressed to that person.
- by leaving it at or posting to the address of the person's (not being the licensee) solicitor in an envelope.
- any other method permitted by the relevant Act and the Rules – specify:

Signature

I certify that I served the attached document in the manner described.

Certified this day:



# REFERRAL FROM THE COMMISSIONER

Licensing Court of South Australia

Liquor Licensing Act 1997

Court File Number (Internal use only)

Details of previous application lodged before the Commissioner which is now to be referred

Application Number

License Number (if applicable)

Premises Name (if applicable)

Premises Address (if applicable - actual or proposed)

Applicant Name

Application Type

Date of Commissioner's Referral *\*If the Commissioner's order is in writing, please attach a copy.*

Signature of Person Lodging the Form

Date

## ATTACHMENT 1 – PARTIES (detail)

### A. Applicant

Individual

Organisation – specify

#### Contact details

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Job title	Date of birth (individual parties only)		
<input type="text"/>	<input type="text"/>		
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Do they require an interpreter?		Do they have any other special requirements?	
<input type="checkbox"/> No <input type="checkbox"/> Yes – specify language / dialect		<input type="checkbox"/> No <input type="checkbox"/> Yes – specify requirements	
<input type="text"/>		<input type="text"/>	

#### Applicant representative details

Was the applicant represented?

Yes  No – go to *B Other Parties*

Type of representative

Legal  Employer Association  Advocate

Is the representative an individual or acting on behalf of a representative organisation?

Individual

Organisation – specify

#### Representative contact details

Title	Given name	Family name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	



## B. OTHER PARTIES - WHO APPEARED BEFORE THE COMMISSIONER

(Only parties that have indicated they wish to remain as parties to the proceedings)

### Other Party #1

Other Party is the:  Intervenor  Objector

Other Party is an:

Individual

Organisation – specify

Organisation legal name

Organisation trading name

#### Contact details

Title

Given name

Family name

Job title

Unit number

Street number

Street name / PO Box

Street type (eg Street, Road, Drive)

Suburb

State

Postcode

Phone

Mobile

Email

### Other Party #2

Other Party is the:  Intervenor  Objector

Other Party is an:

Individual

Organisation – specify

Organisation legal name

Organisation trading name

#### Contact details

Title

Given name

Family name

Job title

Unit number

Street number

Street name / PO Box

Street type (eg Street, Road, Drive)

Suburb

State

Postcode

Phone

Mobile

Email

If there are more parties to this application than this form provides for, please complete and submit an 'AL10 - Details of Additional Party' form for all other parties, available from [www.licensingcourt.sa.gov.au](http://www.licensingcourt.sa.gov.au).



# GENERAL APPLICATION

## Licensing Court of South Australia

Court File Number (Internal Use Only)

**PLEASE NOTE: This form may only be used in connection with an application to the Court permitted under Liquor Licensing or Gaming Legislation.**

Please specify the type of application lodged:

Injunction

Other (please specify): \_\_\_\_\_

### Name of Premises/Person

*Set out details of case:*

### Application Details

*Set out basis of application (\*add additional pages if required):*

**Signature of Person Lodging the Form**

**Date**

Tel: (08) 8207 0954

Email: [licensingcourt@sa.gov.au](mailto:licensingcourt@sa.gov.au)

**Person Lodging the Form**

Individual

Organisation – specify

Organisation legal name

Organisation trading name

**Contact details**

Title

Given name

Family name

Job title

Unit number

Street number

Street name / PO Box

Street type (eg Street, Road, Drive)

Suburb

State

Postcode

Phone

Mobile

Email





File No:

**APPLICATION FOR DIRECTIONS**  
**Licensing Court of South Australia**  
*Liquor Licensing Act 1997*

**Name of Case** *(Set out details of case)*

- Instructions for the Applicant:**
- 1 This form (with a copy for each other party to the application) must be filed with the Court at the email address below.
  - 2 It is usually necessary to include an affidavit setting out the relevant facts relied upon to support the making of the directions sought.
  - 3 The Court will assign a date/time for a hearing of the application and write the details in the space below.
  - 4 The applicant must serve a copy of this form (and any supporting affidavit) on all other relevant parties at least 5 clear days before the hearing.

**Directions Sought**

TAKE NOTICE that *(name of party)*

will seek directions regarding the conduct of the above mentioned proceedings at the date and time listed below.

Details of directions sought:

<b>HEARING DETAILS:</b>	<b>Licensing Court of South Australia</b> <b>7<sup>th</sup> Floor, Riverside Centre</b> <b>North Terrace, Adelaide</b>
	<b>On:</b>
	<b>At:</b>
	<b>Clerk of the Licensing Court of SA</b>
Tel: (08) 8207 0954	Email: <a href="mailto:licensingcourt@sa.gov.au">licensingcourt@sa.gov.au</a>

**Person Lodging the Form**

Name:

Contact:  
*(for corporations/organisations, include a contact person name)*

Address:

Tel:

Email:

**Signature of Person Lodging the Form**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# DETAILS OF ADDITIONAL PARTY

## Licensing Court of South Australia

Court File Number (Internal Use Only)

### ATTACHMENT 2 – DETAILS OF ADDITIONAL PARTIES

When required, this form should be completed and lodged with the Court to provide the details of an additional party to a new application.

#### A. Additional Party #1

Additional Party is the:     Responsible Person     Intervenor     Objector  
 Other (specify):.....

Other Party is an:

Individual

Organisation – specify

Organisation legal name

Organisation trading name

#### Contact details

Title	Given name	Family name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Job title			
<input type="text"/>			
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb		State	Postcode
<input type="text"/>		<input type="text"/>	<input type="text"/>
Phone	Mobile	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

**Additional Party #2**

Additional Party is the:     Responsible Person     Intervenor     Objector  
 Other (specify):.....

Other Party is an:

Individual

Organisation – specify

Organisation legal name

Organisation trading name

**Contact details**

Title

Given name

Family name

Job title

Unit number

Street number

Street name / PO Box

Street type (eg Street, Road, Drive)

Suburb

State

Postcode

Phone

Mobile

Email

**Note: Continue to add Additional Parties if required**

**Signature of Person Lodging the Form**

**Date**

**Lodging Your Completed Form**

Lodge this form as an attachment to a new application.

**LICENSING COURT OF SOUTH AUSTRALIA**

**File No:**

**CERTIFICATE OF SERVICE**

Name of certifier:

Address of certifier:

Name of person/organisation served:

Address at which service effected:

Date service effected:

Time of day:

Between:

Start time am/pm

Finish time am/pm

**Method of service** (tick box)

- personally to:
- leaving it at the licensed premises in an envelope addressed to the licensee with a person apparently employed or engaged in the business conducted under the licence.
- by posting it to the licensee in an envelope addressed to the licensee at the licensed premises or some other appropriate address of which the person who is to serve the notice or document has had notice.
- by leaving it at or posting it to a nominated address in an envelope addressed to the person.
- by posting it to the person's usual place of business or residence in an envelope addressed to that person.
- by leaving it at or posting to the address of the person's (not being the licensee) solicitor in an envelope.
- any other method permitted by the relevant Act and the Rules – specify:

Signature

I certify that I served the attached document in the manner described.

Certified this day:





File No:

## NOTICE OF DISCONTINUANCE

### Licensing Court of South Australia

*Liquor Licensing Act 1997; Gaming Machines Act 1992; Casino Act 1997;  
Authorised Betting Operations Act 2000*

#### Name of Case

*Set out details:*

#### Notice of Discontinuance

TAKE NOTICE that the applicant discontinues the above mentioned matter:

*(tick relevant box)*

wholly

in part

*(If in part, detail which part of the matter, or which orders you no longer seek.)*

#### Person Lodging the Form

Name:

Contact:

*(for corporations/organisations, include a contact person name)*

Address:

Tel:

Email:

#### Signature of Person Lodging the Form

Signature:

Date:



File No:

## NOTICE OF INTENTION TO INTERVENE

### Licensing Court of South Australia

Section 77 Liquor Licensing Act 1997

#### Name of Case

*(This form should only be completed if the intervenor has not been a party to proceedings before the Commissioner.)  
Set out details of case:*

#### Instructions for the Intervenor:

- 1 This form (with a copy for each other party to the application) must be filed with the Court.
- 2 The Intervenor must serve a copy of this form on all other parties as soon as is practicable.

#### Intervenor's Details

Name:

Contact:

*(for corporations/organisations, include a contact person name)*

Address:

Tel:

Email:

*If the applicant is not represented, this will be regarded as the address for service in relation to any documents produced by the Court or to be served by any other party. If this is address changes you should complete the relevant Form.*

#### Details of Intervenor's Representative (if any)

Name:

Contact:

Address:

Tel:

Email:

*A representative is taken to have authority to represent the party as the party's agent, and to accept, on behalf of the party, service of documents related to the proceeding unless the contrary is established.*

#### Brief Reasons for seeking to Intervene

*Details:*

#### Signature of Person Lodging the Form

Signature:

Date:



File No:

## NOTICE OF OBJECTION

### Licensing Court of South Australia

Section 77 Liquor Licensing Act 1997

#### Name of Case

*(This form should only be completed if the objector has not lodged a Notice of Objection in proceedings before the Commissioner.)*

Set out details of case:

#### Objector's Details

Name:

Contact:

*(for corporations/organisations, include a contact person name)*

Address:

Tel:

Email:

*If the applicant is not represented, this will be regarded as the address for service in relation to any documents produced by the Court or to be served by any other party. If this address changes you should complete the relevant form.*

#### Details of Objector's Representative (if any)

Name:

Contact:

Address:

Tel:

Email:

*A representative is taken to have authority to represent the party as the party's agent, and to accept, on behalf of the party, service of documents related to the proceeding unless the contrary is established.*

#### Grounds of Objection

*Details:*

#### Signature of Person Lodging the Form

Signature:

Date:



File No:

## NOTICE OF WITHDRAWAL (GENERALLY)

Licensing Court of South Australia

*Liquor Licensing Act 1997*

### Name of Case

*Set out details of case:*

### Notice of Withdrawal

TAKE NOTICE that *(name of party)*

does not wish to be further heard on this matter.

### Person Lodging the Form

Name:

Contact:

*(for corporations/organisations, include a contact person name)*

Address:

Tel:

Email:

### Signature of Person Lodging the Form

Signature:

Date:



File No:

## NOTICE OF OR CHANGE OF ADDRESS FOR SERVICE OR REPRESENTATION

Licensing Court of South Australia

### Name of Case

Set out details:

### Address for Service or Representation

This will be regarded as the address for service in relation to any documents produced by the Court or to be served by any other party.

Tick relevant box and complete details.

TAKE NOTICE that *[name of party/ies]*:  
has an **address for service** of *[set out contact detail/s and address/es or write "as below"]*:

TAKE NOTICE that *[name of party]*:  
**has changed address for service** to *[set out contact details and address or write "as below"]*:

TAKE NOTICE that *[name of representative]*:  
whose address for service is *[set out contact details and address or write "as below"]*:  
**represents** *[name of party/ies]*

TAKE NOTICE that *[name of party]*:  
**is no longer represented** and the address for service is:  
*(set out contact detail/s and address/es or write "as below")*

TAKE NOTICE that *[name of representative]*:  
Of *[set out contact details and address or write "as below"]*:  
**now represents** *[name of party]*:

**Person Lodging the Form**

Name:

Contact:

*(for corporations/organisations, include a contact person name)*

Address:

Tel:

Email:

**Signature of Person Lodging the Form**

Signature:

Date:



File Number:

## SUMMONS TO ATTEND AND/OR PRODUCE DOCUMENTS OR THINGS

Licensing Court of South Australia

### Name of Case

*Here set out a short description of the case:*

### Person Summoned

TO:

### YOU ARE SUMMONED:

*(one box only to be ticked)*

- to attend to give evidence – see **Part A** of this form; or
- to produce the documents or things specified in the Schedule – see **Part B** of this form; or
- to attend to give evidence and to produce the documents or things specified in the Schedule – see **Part C** of this form.

Please read **Notes** at the end of this summons.

Dated the            day of                                  20    .

.....  
**Licensing Court of SA**

**Part A – Details of Summons to Attend Only**

Date, time and place at which you must attend to give evidence:

Date:

Time:

Place:

*(one box only to be ticked)*

Level 7, Riverside Centre, North Terrace, Adelaide SA 5000

*(other venue):* .....

You must continue to attend from day to day unless excused by the Court, or the person at whose request the summons was issued, or until the hearing of the matter is completed.

**Part B – Details of Summons to Produce**

You must comply with this summons by delivering or sending this summons, or a copy of it, and **copies of** the documents or things specified in the Schedule below to the Clerk of the Licensing Court of South Australia at the address below so that they are received by the date and time specified. Please contact the Clerk of the Court on 8207 0954 should you wish to forward documentation electronically.

Date, time and place to produce the summons, or a copy of, it and a **copy of** the documents or things:

Date:

Time:

Place:

*(one box only to be ticked)*

*(Delivery)* Riverside Centre, North Terrace, Adelaide SA 5000  
OR *(Post):* PO Box 3636, Rundle Mall SA 5000

*(other venue):* .....

**PART B - SCHEDULE**

*The documents or things you must produce are as follows. (If insufficient space attach list.)*



**Part C – Details of Summons Both to Attend to give Evidence and to Produce**

Insofar as you are required by this summons to attend to give evidence, you must attend as follows:

Date:

Time:

Place:

*(one box only to be checked)*

Level 7, Riverside Centre, North Terrace, Adelaide SA 5000

*(other venue):* .....

You must continue to attend from day to day unless excused by the Court or the person authorised to take evidence in this proceeding or until the hearing of the matter is completed.

The **copies of** documents or things you must bring with you are as follows:

**PART C – SCHEDULE**

*The documents or things you must produce are as follows. (If insufficient space attach list.)*

<b>This Summons is Prepared and Issued at the Request of</b>	
Name:	
Contact:	
<i>(for corporations/organisations, include a contact person name)</i>	
Address:	
Tel:	Fax:
Email:	

## Notes on the Summons

### Compliance with summons

- 1 Section 24(2) of the *Liquor Licensing Act 1997* provides that a person having been served with a summons to attend before the Court or to produce documents or things who fails to comply with the summons without reasonable excuse is guilty of an offence punishable by a fine of up to \$2,500.

### Informal service

- 2 Even if this summons has not been served personally on you, you must, nevertheless, comply with its requirements, if you have, by the date specified in the summons, actual knowledge of the summons and of its requirements.

### Addressee a corporation

- 3 If the summons is addressed to a corporation, the corporation must comply with the summons by its appropriate or proper officer.

### Summons to attend

- 4 If this summons requires you to attend to give evidence you should note that the progress of the hearing may be such that you will not be called to give your evidence until after the time shown on the summons. If you do not wish to wait outside the hearing room until it is your turn to give evidence, you can contact the person at whose request the summons was issued (whose name, address and telephone number appear above) who may be able to arrange a later time for you to attend. Otherwise you must attend at the date and time shown.
- 5 When you attend at the Court, you will need to locate the room in the building where the hearing is taking place and how to get to that room. That room may not be known until shortly before you have to attend. If attending the Riverside Centre there are noticeboards in the lift lobby areas listing all cases to be heard that day and what room they are in. Information about other venues can be found out by either contacting the person at whose request the summons was issued (whose name, address and telephone number appear above) or by inquiry to the Clerk of the Court (tel: (08) 8207 0954).

### Conduct money

- 6 You may be entitled to your reasonable expenses of travelling to attend, and the allowance payable to a witness in a civil action in the Supreme Court, and any other reasonable costs. If you seek such expenses who should enquire at first instance to the person at whose request the summons is issued. See generally Rule 28 of the *Licensing Court Rules 2012*.

### Objection to summons

- 7 You have the right to apply to the Court to have the summons set aside on any sufficient grounds, including:
  - (i) the document or thing is not relevant to the proceedings; or
  - (ii) the document or thing is privileged; or
  - (iii) oppressiveness, including the possible incurring of substantial expense which may not be reimbursed; or
  - (iv) non-compliance with the Court's rules.

This is done by lodging an "Application for Directions" together with a supporting Affidavit.

### Production of a number of documents or things

- 8 If you produce more than one record, you must, if requested by the Court, produce a list of the documents or things produced.

**Production of copy instead of original**

9 This Summons does not require you to produce original documents or things. You may comply with the Summons by producing **copies** of the specified documents or things.

**Inspection of documents or things produced**

10 Once documents or things are produced to the Court the parties will, subject to any contrary ruling by the Court, after 7 days have unrestricted access to the documents or things. A party seeking access before 7 days must make an application to the Court to do so. If you object to the documents or things produced in response to this summons being inspected by a party to the proceeding or any other person, you must, at the time of production, lodge an "Application for Directions" together with a supporting Affidavit. The Court will then determine whether or not, and upon what conditions, to allow access. The parties will not be able to access the documents or things pending the outcome of an application to the Court.

11 The Court may, in its absolute discretion, permit the parties to the proceeding to make a copy of the documents or things.

**Destruction of documents or things**

12 The copies of the summonsed documents or things will be destroyed after giving you 14 days notice in writing.