

Application to the Local Court

Section 45 Local Court Act 2007

Part 4 Local Court Rules 2009

Notice of Listing

Place: This will be completed by the court

Time and Date: This will be completed by the court

Applicant Details

Name: Write your name

Address: Write your address

Postal Address: Write the best address for you to be sent mail, for example, a PO Box

Lawyers Name & Address: Write not applicable if you are representing yourself

Respondent Details

Name: Write the name of the other party

Address: Write the address of the other party

Fax: Write the other parties fax number or not applicable

Additional Parties

Name: Leave blank

Address:

Connection to proceedings (e.g. Owner of goods):

Statement of Service

I (name) of (occupation) did serve a copy of this application on
(name(s) on (date) by (tick one):

☐ delivering a copy personally to the person

☐ giving a copy to (name), an adult person at the address of the respondent.

☐ sending a copy by registered mail to the respondent's address at:

☐ sending a copy by facsimile to the respondent's address at: (only available where respondent is a Government Department and fax number provided). Advice confirming successful transmission of the document was received by me on (date):

Signature:

Name:

Witness Signature:

Name:

Application to the Local Court

Act and Section under which application lodged: [Protection of the Environment Operations Act 1997, s268](#)

Order/s Sought:

The court make the following orders about noise:

Explain what orders you want the court to make, for example, that a specified noise be abated within a specified time, that the respondent prevent the recurrence of the offensive noise.

Number the orders in a list.

Grounds for Application:

1. My occupation of premises at (address of premises) is affected by offensive noise which comes from (address).
2. The respondent is the owner and occupant of (address).
3. Specify what noise is being made and how the respondent is responsible. If the noise has stopped but you believe it will start again, explain why you believe this.
4. Write what steps you have taken to resolve the problem, such as mediation.

Other relevant Information:

(E.g. Date of birth, Licence number, other relevant charges, alternative address)

Signature of Applicant: [Sign here](#)

(Signature not required if applicant is a police officer or public officer)

Signature of Registrar: [The Registrar will sign here](#)

(Signature not required if applicant is a police officer or public officer)

Application filed at: [This will be completed by the court](#)

Date of filing application: [This will be completed by the court](#)

Court Registry Use Only

Date Court Attendance Notice Filed:

Place of Filing:

(If different from place of first listing):

Court Reference Number:

Fees (circle): Paid / Waived / Remitted / Exempt

Payment Stamp