

Change a non-contact order

S15-S17 VICTIMS' ORDERS AGAINST VIOLENT OFFENDERS ACT 2014

When to use this form

You want to make changes to a non-contact order that protects you or protects someone else from you.

Note: This application form cannot be used to change a persons bail conditions in the criminal jurisdiction.

Getting help to fill in this form

You can:

- email vovo@justice.govt.nz
- call 0800 COURTS (0800 268 787)
- go to your local district court. District courts are open from 9am to 5pm from Monday to Friday. You can find your local court in the blue government pages at the front of the phonebook or at justice.govt.nz/services/finding-your-local-court
- talk to a lawyer.

Step 1 Who are you?

| I am the person who applied for the non-contact order. I am being protected by it. You can apply to change the conditions of a non-contact order, extend or reduce its length or have it cancelled ('discharged'). |
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| I am the offender. You can apply to change the conditions of a non-contact order, extend or reduce its length or have it discharged. |
| I am a person associated with the offender (this means you were included in the temporary non-contact order under section 12 of the Victims' Orders Against Violent Offenders Act 2014). You can apply to have the part of the order that's about you discharged. You can't apply to have the conditions of a non-contact order changed. |

Step 2 Tell us about the non-contact order

Please give us as much information for this section as you can. We understand that you might not know addresses or lawyer's details for the other person. Case number Victim's details Don't give my contact details to the offender or any other people included in the non-contact order. Full name Phone Email Current address **Address for service** If written information about this application should be posted to a different address, such as a lawyer's office, please give us the address. **LAWYER'S CONTACT DETAILS** If a lawyer is filling in this application or an agent is acting for a lawyer, please give us their details. Lawyer's name Lawyer's firm Agent's name **Contact details** Phone Email Address

| Details for the offender or other person in the non-contact order |
|--|
| Full name |
| Phone |
| Email |
| Current address: |
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| Address for service If written information about this application should be posted to a different address, such as a lawyer's office, please give us the address. |
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| LAWYER'S CONTACT DETAILS If a lawyer is filling in this application or an agent is acting for a lawyer, please give us their details. |
| Lawyer's name |
| Lawyer's firm |
| Agent's name |
| Contact details |
| Phone |
| Email |
| Address |
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Step 3 Tell us what changes you want made to the non-contact order

| If you need more room, you can attach extra pages. | | |
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| Step 4 Sign and date the | form | |
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| | | |
| Signature | | |
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| Step 5 Send in the form | | |
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| You can email , post or hand in the forms to the court t | nal is processing the non-contact order. | |
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| What happens next? | | |
| A registrar or judge will look at the information you | ou've given us. They will then decide if the temporary | |