



Magistrates' Court
of Victoria

Practice Direction

No. 10 of 2015

**INTERVENTION ORDERS -
MENTION AND DIRECTIONS HEARINGS CHECKLIST**

Preamble

Practices have developed at different venues of the Court requiring different case management information forms to be completed in relation to intervention order proceedings.

This practice direction is designed to harmonise those practices and promote consistency across all venues of the Court.

FVIO and PSIO Intervention order Mention and Directions Hearings Checklist

1. This practice direction applies to intervention order applications under the *Family Violence Protection Act 2008 (FVIO)* or the *Personal Safety Intervention Orders Act 2010 (PSIO)* respectively.
2. Unless the Magistrate otherwise orders, the attached checklist must be completed and filed with the Court at all hearings other than the day upon which a proceeding is listed for a contested hearing.

This Practice Direction commences on 2 November 2015

A blue ink signature, appearing to read 'P. Lauritsen', written over a horizontal line.

PETER LAURITSEN
Chief Magistrate

Date: 22 OCTOBER 2015



Magistrates' Court of
Victoria

FAMILY VIOLENCE INTERVENTION ORDER MENTION & DIRECTIONS HEARING CHECKLIST

For completion by POLICE PROSECUTORS, LEGAL REPRESENTATIVES or Magistrate when a FVIO Application is adjourned from
Hearing Type: ☐ *Mention to Mention* or ☐ *Mention to Directions Hearing* or ☐ *Directions Hearing to Contest*

Date:	<input type="text"/>	Case number:	<input type="text"/>
Applicant:	<input type="text"/>	Applicant's Lawyer or VicPol Pros/Lawyer:	<input type="text"/>
AFM:	<input type="text"/>	AFM's Lawyer:	<input type="text"/>
Respondent:	<input type="text"/>	Respondent's Lawyer:	<input type="text"/>
Next Proposed Date:	/ /		

Issues in dispute

- ☐ Factual argument
- ☐ Conditions of the FV intervention order
- ☐ Inclusion of children on the FV intervention order
- ☐ Effect of FV intervention order on firearms licence

Hearing requirements

- Duration:
- Interpreter for: ☐ AFM ☐ Respondent
- Language: Ethnic Group:
- Remote witness facility required? ☐ Yes ☐ No

Witnesses

Number of witnesses to be called by: Applicant: Respondent:

☐ Children present at incident: (Note prohibition FVPA s67) Ages:

Names of witnesses:

Other Proceedings

Other relevant proceedings: ☐ Criminal ☐ Child Protection ☐ Family Law ☐ Other
Provide Particulars (including next date): / /

Orders Sought

- ☐ Summary of Allegations x 3 to be filed by: / /
- ☐ Respondent's Reply to Summary of Allegations x 3 to be filed by: / /
- ☐ Applicant witness summaries/ Statements/ Copy exhibits x 3 to be filed by: / /
- ☐ Respondent witness summaries/ Statements/ Copy exhibits x 3 to be filed by: / /

Section 71/72 FVPA (orders usually only made at Directions Hearing)

- ☐ s71.4 Warning to Respondent that if refuses legal representation, can't XXN etc
- ☐ s71 Order for VLA to offer respondent legal representation for XXN of protected witness.
- ☐ s72 Order for VLA to offer protected witness legal representation for XXN by respondent's legal rep.

Notes

Other relevant issues:

Name and signature of
AFM or Lawyer

Name and signature of
Applicant or Lawyer or Prosecutor

Name and signature of
Respondent or Lawyer



Magistrates' Court of
Victoria

PERSONAL SAFETY INTERVENTION ORDER MENTION & DIRECTIONS HEARING CHECKLIST

For completion by POLICE PROSECUTORS, LEGAL REPRESENTATIVES or Magistrate when a PSIO Application is adjourned from
Hearing Type: ☐ *Mention to Mention* or ☐ *Mention to Directions Hearing* or ☐ *Directions Hearing to Contest*

Date:	<input type="text"/>	Case number:	<input type="text"/>
Applicant:	<input type="text"/>	Applicant's Lawyer or VicPol Pros/Lawyer:	<input type="text"/>
Protected Person:	<input type="text"/>	PP's Lawyer:	<input type="text"/>
Respondent:	<input type="text"/>	Respondent's Lawyer:	<input type="text"/>
Next Proposed Date: / /			

Issues in dispute

- ☐ Factual argument
☐ Conditions of the intervention order
☐ Effect of intervention order on firearms licence

Hearing requirements

- Duration: _____
Interpreter for: ☐ PP ☐ Respondent
Language: _____
Remote witness facility required? ☐ Yes ☐ No

Witnesses

Number of witnesses to be called by:	Applicant:	<input type="text"/>	Respondent:	<input type="text"/>
Names of witnesses: _____ _____ _____				

Other Proceedings

Other relevant proceedings: ☐ Criminal ☐ Civil ☐ VCAT ☐ Other
Provide Particulars (including next date): _____

Mediation

Have parties been assessed by a DSCV Dispute Assessment Officer for mediation? YES ☐ NO ☐

Was matter suitable for mediation? YES ☐ NO ☐

Was mediation held? YES ☐ NO ☐ If yes, Result: _____

Orders Sought

- | | | |
|--|---|---|
| <input type="checkbox"/> Summary of Allegations x 3 to be filed by: | / | / |
| <input type="checkbox"/> Respondent's reply to Summary of Allegations x 3 to be filed by: | / | / |
| <input type="checkbox"/> Applicant witness summaries/ Statements/ Copy exhibits x 3 to be filed by: | / | / |
| <input type="checkbox"/> Respondent witness summaries/ Statements/ Copy exhibits x 3 to be filed by: | / | / |

Notes

Other relevant issues: _____

Name and signature of
PP or Lawyer

Name and signature of
Applicant or Lawyer or Prosecutor

Name and signature of
Respondent or Lawyer