Choose an item.

**APPLICATION FOR EXTENSION OF INFRINGEMENT – time for objecting to infringement notice**

* **Drink drive/drug drive infringement**
* **Excessive drink or drug operation of a sea vessel infringement**

**Case reference:**

 **Case Reference:**

1. **DETAILS OF PERSON MAKING THE APPLICATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name:** |  | **Surname** |  |

|  |  |
| --- | --- |
| **Address:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Postcode** |  |

**Note: Complete only if the infringement is in the name of a company\***

|  |  |
| --- | --- |
| **Company Name:**  |  |

|  |  |
| --- | --- |
| **Company address:** |  |

|  |  |  |
| --- | --- | --- |
|  | **Postcode** |  |

|  |  |
| --- | --- |
| **Position held in company**  |  |

\* ONLY THE PERSON NAMED ON THE INFRINGEMENT NOTICE CAN APPLY OR IF THE INFRINGEMENT IS ISSUED AGAINST A COMPANY, A PERSON AUTHORISED BY THAT COMPANY. ANY PERSON MAKING AN APPLICATION ON BEHALF OF A COMPANY MUST HAVE A LETTER OF AUTHORITY TO ACT SIGNED BY THE COMPANY DIRECTOR ACCOMPANYING THEIR APPLICATION, WHICH MUST BE FILED WITH THE REGISTRAR PRIOR TO THE HEARING DATE.

Victoria Police/Traffic Camera Office

**Respondent**

**2. INFRINGEMENT NUMBERS:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
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|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

 **3. TO THE COURT**

[ ]  I hereby make application pursuant to Choose an item.

to extend the period of time to lodge an objection to an infringement.

[ ]  I first became aware of this/these infringements on (date): Click or tap to enter a date.

**4. GROUNDS FOR MAKING THE APPLICATION**

I,        of [address]       , make the following statutory declaration under the *Oaths and Affirmations Act 2018*:

|  |
| --- |
|       |
|       |
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|       |
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|       |
|       |
|       |

I declare that the contents of this statutory declaration are true and correct, and I make it knowing that making a statutory declaration that I know to be untrue is an offence.

Applicants signature ,

Declared at ,in the state of Victoria , *o*n .

**I am an authorised statutory declaration witness[[1]](#endnote-1) and I sign this document in the presence of the person making the declaration:**

 **Witness name**

 **, Qualification**

|  |
| --- |
| **LISTING OF APPLICATION** *(registrar to complete)* |
| This application is listed for hearing before the Magistrates’ Court at |       |  |
| at |       |  am / pm | on *(date)* |       |  |
| Date: |       |  |  |
|  |  |  | *Registrar of the Magistrates’ Court* |
|  |

**Before (signature of witness) Address:**

1. *A person authorised under section 30(2) of the Oaths and Affirmations Act 2018 to witness the signing of a statutory declaration.* [↑](#endnote-ref-1)