

WESTERN AUSTRALIA
Civil Judgments Enforcement Act 2004
Part 3 Division 1
FORM 7 – APPLICATION

COURT
LOCATION:
Court ref number:

Judgment creditor or applicant	Name:
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Judgment debtor or obligated person	Name:
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To: The Registrar

The judgment creditor/judgment debtor/third person/Sheriff makes an application for the following:
Tick [✓] appropriate box

Order
 Cancellation or amendment of an order
 Hearing
 Directions

NATURE OF ORDER/CANCELLATION/DIRECTIONS SOUGHT

AN AFFIDAVIT SUPPORTING THE APPLICATION IS ATTACHED *Please tick []*

Date: _____ Signature of applicant/lawyer.....

NOTICE OF HEARING
This application will be heard at..... Court held at
on day the day of 20..... at am/pm

To: (judgment creditor/judgment debtor/third person) To: (judgment creditor/judgment debtor/third person)

Date: _____ Court Seal

Tick [✓] appropriate box

Lodged by	<input type="checkbox"/> Judgment creditor or judgment creditor's lawyer <input type="checkbox"/> Judgment debtor or judgment debtor's lawyer <input type="checkbox"/> Other
Address for service	