

APPLICATION FOR BAIL

IN THE MAGISTRATES' COURT OF VICTORIA AT

APPLICANT'S DETAILS

Applicant Name	<input type="text"/>	Date of Birth	<input type="text"/>
Address (prison)	<input type="text"/>		

CHARGE DETAILS

Case Number:	<input type="text"/>
Respondent (Informant):	<input type="text"/>
Charges:	<input type="text"/>
Nature of Proceedings	<input type="checkbox"/> Summary stream <i>(please tick)</i> <input type="checkbox"/> Indictable stream <i>(please tick)</i>
Date & Place Where the Applicant is Required to Appear to Answer Charges:	
<input type="text"/>	at <input type="text"/>

PREVIOUS BAIL APPLICATIONS Y N

Details of Previous Bail Application in Relation to These Charges *(List all previous bail applications by date and the name of the magistrate/s before whom the application/s were made)*

Date	<input type="text"/>	Magistrate	<input type="text"/>
Date	<input type="text"/>	Magistrate	<input type="text"/>

If bail Previously Refused, State New Facts & Circumstances

CO-ACCUSED Y N

Details of Co-Accused *(List the names of ALL co-accused, date/s of any bail application and the name/s of presiding magistrates)*

Name/Case#	<input type="text"/>	Bail App	<input type="text"/>	Magistrate	<input type="text"/>
Name/Case#	<input type="text"/>	Bail App	<input type="text"/>	Magistrate	<input type="text"/>

HEARING DETAILS FOR THIS APPLICATION

TAKE NOTICE that the applicant intends to apply for bail at the Magistrates' Court of Victoria

sitting at on 9.30am 10.30am other

CISP / CREDIT Assessment required? *(please tick)* **Will evidence be called?** *(please tick)*

Estimated Duration:

Dated at: on:

Applicant's Legal Practitioner

- TO:
- (please tick)*
- Registrar, Magistrates' Court
 - The Respondent
 - The Office of Public Prosecutions
 - VicPol Prosecutions

Name:

Phone:

Fax:

Email: