# NOTICE OF MOTION WRIT OF RESTITUTION

COURT DETAILS			
Court	Supreme Court of New South Wales		
Division	Common Law		
List	Possession		
Registry	Sydney		
Case number			
TITLE OF PROCEEDINGS			
[First] plaintiff	[name]		
#Second plaintiff #Number of plaintiffs (if more than two)			
[First] defendant	[name]		
#Second defendant #Number of defendants (if more than two)			
JUDGMENT DETAILS			
Date of judgment to be enforced			
ENFORCEMENT DETAILS			
Date writ of possession issued			
FILING DETAILS			
Person seeking orders	[name] [role of party eg plaintiff]		
#Filed in relation to	writ of possession in favour of the [role of party eg plaintiff] [include only if form to be eFiled]		
#Legal representative	[solicitor on record] [firm]		
#Legal representative reference	[reference number]		
Contact name and telephone	[name] [telephone]		
Contact email	[email address]		
PERSON AFFECTED BY ORDERS SOUGHT			

#### PERSON AFFECTED BY ORDERS SOUGHT

[name] [role of party eg defendant]

## **HEARING DETAILS**

This motion is to be dealt with in the absence of the parties.

#### [on separate page]

#### **ORDERS SOUGHT**

- 1 #Leave for the issue of a writ of restitution.
- 2 #The issue of a writ of restitution to restore to the [role of party eg plaintiff (eg where a defendant has wrongfully regained possession)] possession of the land comprised in [title/folio numbers] being the land situated at and known as [address].

#The issue of a writ of restitution to restore to the [role of party eg defendant (eg if judgment for possession has been set aside)] possession of the land comprised in [title/folio numbers] being the land situated at and known as [address].

#### SIGNATURE

#Signature of legal representative #Signature of or on behalf of party if not legally represented

Capacity

[eg solicitor, authorised officer, role of party]

Date of signature

[on separate page]

#### AFFIDAVIT

Name

Address

Occupation

Date

I [#say on oath #affirm]:

1 #I am the [role of party].

#I am [give details of the capacity of the person making the affidavit and the facts that qualify the person to make the affidavit].

- The [role of party eg defendant] is the registered proprietor of the land comprised in [Title/Folio numbers] being the land situated at and known as [address]
  (the property).
- 3 Annexed at page and marked " " is a copy of the Sheriff's notice to vacate dated .
- 4 #Annexed at page and marked " " is a copy of the Sheriff's report on the execution of the writ of possession dated .
- 5 [State the facts and circumstances that entitle the person seeking orders to a writ of restitution. Select the appropriate option. Modify, or add further paragraphs, if required.]

#[#After entry of the property by the Sheriff on (date) under a writ of possession #After the plaintiff was put in possession of the property on (date) by the Sheriff], the [role of party eg defendant] re-occupied the property [give particulars of reoccupation, eg by breaking the locks].

#[#After entry of the property by the Sheriff on (date) under a writ of possession #After the plaintiff was put in possession of the property on (date) by the Sheriff], the judgment was set aside.

#Possession of the property has been wrongfully obtained [#in excess of the terms of the writ of possession #under a writ of possession issued on (date) which was irregular because (give particulars of irregularity)].

6 #The source of my knowledge of the matters stated in this affidavit concerning the re-occupation of the property by the [role of party] is

3

- #[Indicate, if appropriate, the extent to which any judgment debt (eg if possession and debt claimed) or amounts due under the judgment for costs have been satisfied
  see UCPR 39.2(3).]
- 8 #Leave to issue a writ of restitution was granted by the court on [date].

#Leave to issue a writ of restitution is being sought in this motion.

9 The amounts claimed for costs in respect of this writ are:

Execution fees	\$
Solicitors fees	\$
TOTAL	\$

**#SWORN #AFFIRMED at** 

Signature	of	deponent	t
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Name of witness

Address of witness

Capacity of witness

# [#Justice of the peace #Solicitor #Barrister #Commissioner for affidavits #Notary public]

And as a witness, I certify the following matters concerning the person who made this affidavit (the deponent):

#I saw the face of the deponent. [OR, delete whichever option is inapplicable]
 #I did not see the face of the deponent because the deponent was wearing a face covering, but I am satisfied that the deponent had a special justification for not removing the covering.\*

#I have known the deponent for at least 12 months. [OR, delete whichever option is inapplicable]
 #I have confirmed the deponent's identity using the following identification document:

Identification document relied on (may be original or certified copy)<sup>†</sup>

Signature of witness

Note: The deponent and witness must sign each page of the affidavit. See UCPR 35.7B.

<sup>[\*</sup> The only "special justification" for not removing a face covering is a legitimate medical reason (at April 2012).]

<sup>[†&</sup>quot;Identification documents" include current driver licence, proof of age card, Medicare card, credit card, Centrelink pension card, Veterans Affairs entitlement card, student identity card, citizenship certificate, birth certificate, passport or see Oaths Regulation 2011.]

Note: The deponent and witness must sign each page of the affidavit. See UCPR 35.7B.

[Include the following additional information, if known, which will assist the Sheriff when executing the writ.]

### ADDITIONAL INFORMATION TO ASSIST SHERIFF'S OFFICE

Short description of claim [eg failu

[eg failure to pay mortgage]

Persons in occupation

Telephone number of occupier(s) (if known)

Are there any animals or anything else at the premises that might pose a threat to the health and safety of Sheriff's officers?