

I,
[name]

of
[address]

.....
[occupation]

swear (or affirm):

1. I am the applicant for

[select and complete the option that applies]

a personal order

or

a review of a personal order made on *[date]*

for the person in respect of whom the application is made (“the person”) as follows:

[set out specific order(s) required – see s.10(1) of the Protection of Personal and Property Rights Act 1988 (“the Act”)]

2. My relationship with the person is as follows:

.....

3. I confirm the contents of my application.

4. I confirm that to the best of my knowledge the person

[select the option that applies]

is ordinarily resident in New Zealand and is of or over the age of 20 years;

or

is under the age of 20 and is or has been married.

5. To the best of my belief I confirm that the person

[select and complete the option that applies]

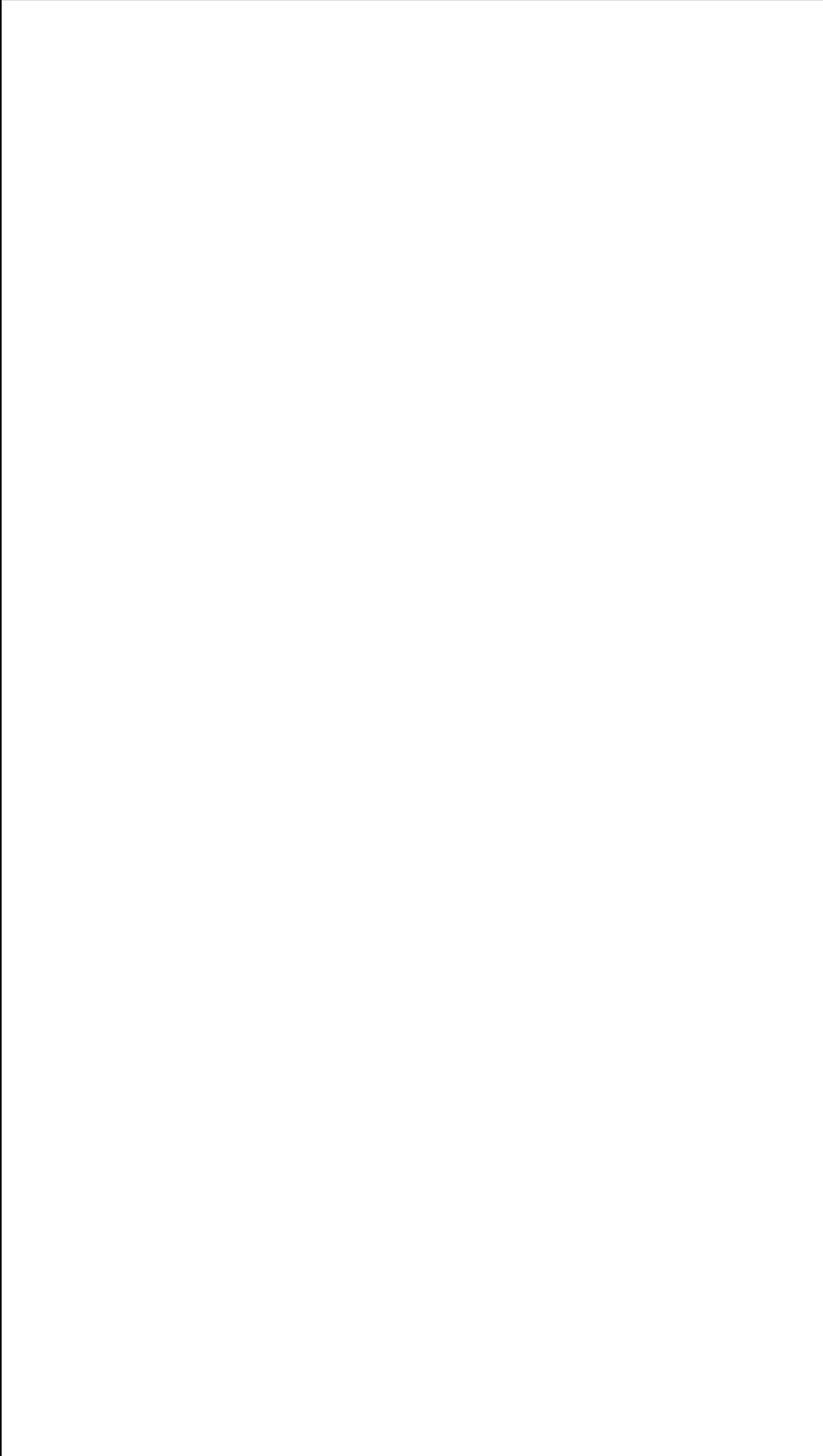
Lacks, wholly or partly, the capacity to understand the nature, and to perceive the consequences of decisions in respect of matters relating to his/her personal care and welfare;

or

Has the capacity to understand the nature, and to foresee the consequences of decisions in respect of matters relating to his/her personal care and welfare but wholly lacks the capacity to communicate those decisions in respect of such matters for the following reasons:

[set out factual basis including reference to any medical reports/evidence]

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6. *[select and complete the option that applies]*

To the best of my belief the person is neither a patient nor proposed patient under the Mental Health (Compulsory Assessment and Treatment) Act 1992.

To the best of my belief the person is a patient under a Compulsory Treatment Order made under the Mental Health (Compulsory Assessment and Treatment) Act 1992. An order was made for in-patient/community treatment by the

District Court at *[place]*

on *[date]* and that order still continues.

The person receives treatment from:

.....
[name of hospital or service provider]

To the best of my belief, the person is not subject to any such Order under the Mental Health (Compulsory Assessment and Treatment) Act 1992, but is currently receiving treatment/assessment from:

.....
[name of hospital or service provider]

7. In the information sheet that accompanies this application, I have named the following as people/organisations affected by this application. I have obtained consents from the following:

[set out]

I consider service should be effected on the following: *(See Note 1)*

[set out names/organizations]

To the best of my knowledge and belief there are no other persons/organisations including family and whanau members who should be served with the application.

[select and complete if applies]

- 8. I do not believe the person should be served with the application for the following reasons:

[set out reasons]

[select and complete if applies]

- 9. I do not believe the person should appear in Court in respect of the hearing of this application for the following reasons:

[set out reasons]

10. I believe that the order sought will make the least restrictive intervention possible in the life of the person, having regard to the degree of the person's incapacity and I will endeavour to enable or encourage the person to develop such capacity as he/she has to the greatest extent possible.

11. My reasons for obtaining this order are as follows:

[set out in sufficient detail to inform the Court why the order is necessary]

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[select and complete if applies]

12. I seek an interim order because it is in the best interests of the person that an immediate order be made until the Court is able to make a final decision, for the following reasons:

[set out reasons]

Sworn (or Affirmed) at *[place]*

this day of 200

before me.

.....
Applicant

.....
Signature of person administering oath/affirmation who shall add his/her office

Note 1

As a minimum requirement service should be effected on the following persons:

- *Person in respect of whom the application is made (unless the person wholly lacks the capacity to understand the nature and purpose of the proceedings, or exceptional circumstances exist to justify dispensing with service);*
- *Each parent or guardian of that person;*
- *If the person is not living with either his or her parents or guardians, any person with whom the person is living;*
- *If it is proposed that a person be appointed as welfare guardian or manager, that person;*
- *If a welfare guardian is acting for the person, that welfare guardian;*
- *If the person is subject to a property order, the manager of the person's property.*

(If applicant does not seek service, reasons to be given – e.g. family member whereabouts unknown).