Request for Approval and Registration  
Online Restraining Order Application Form

|  |
| --- |
| Private Practitioner Application |
| Given name:  Family name:  Address:  Phone:  Email: |
| I have read and understand the [Conditions of Use](https://ecourts.justice.wa.gov.au/eCourtsPortal/Home/ConditionsOfUse) associated with using the eCourts Portal and agree to abide by them.  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: |

|  |
| --- |
| Law Firm Application  Note: A law firm application must be approved by a senior legal or administrative representative of the law firm |
| Business name:  Business address:  Approver name:  Approver title  Approver email:  Phone: |
| I have read and understand the eCourts Portal [Conditions of Use](https://ecourts.justice.wa.gov.au/eCourtsPortal/Home/ConditionsOfUse) and agree to abide by them. I certify that the users listed below at Attachment A have a legitimate purpose for the access requested, and that those users will comply with the eCourt Portal [Conditions of Use](https://ecourts.justice.wa.gov.au/eCourtsPortal/Home/ConditionsOfUse).  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: |

**Please email completed form to** [**cvoc@justice.wa.gov.au**](mailto:cvoc@justice.wa.gov.au)

----------------------------------------------------------------------------------------------------------------------------------

**Admin:**

**Approved/Not approved** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of delegated authority

# Attachment A

|  |  |  |  |
| --- | --- | --- | --- |
| Users requiring Access to Online Restraining Order Application Portal | | | |
| Solicitor | Paralegal / Admin staff | Email address | Already registered on eCourts Portal? |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |