MAGISTRATES COURT of WESTERN AUSTRALIA APPLICATION FOR WITNESS SUMMONS

Criminal Procedure Act 2004
Criminal Procedure Regulations 2005 – Form 9

Court number	
Magistrates Court at	

Criminal P	rocedure Regulati	ons 2005 – Form 9								
Case (Names of all parties)										
Applicant (Name of the	Name					Telephone no				
party requesting)	Address					Facsimile no				
Request	The applicant requests the court to issue the attached witness summons(es) requiring the witness(es) named below to give or produce evidence on behalf of the above applicant in this matter.									
Full name of witness(es)	Full name		Address				ummons attend	Summons to produce		
				1						
	(if insufficient space attach further pages)									
Signature of applicant or lawyer					Date					
	Арр	licant/ applicant's	lawyer							
Result of application	□ Ар	plication granted								
	☐ Application refused									
Reasons for refusal										
Signature										
	Prescribed Court Officer					Date				