



REPUBLIC OF SOUTH AFRICA

**FORM 9**

[Regulation 10]

**AFFIDAVIT FOR PURPOSES OF FURTHER WARRANT OF ARREST**  
**SECTION 8(3) OF THE DOMESTIC VIOLENCE ACT, 1998 (ACT NO.116 OF 1998)**

IN THE MAGISTRATE'S COURT FOR THE DISTRICT OF _____	
HELD AT _____	APPLICATION NO. _____ / _____
In the matter between:	
<b>APPLICANT:</b> _____ (*Id.No./Date of Birth: _____)	
<b>AND</b>	
<b>RESPONDENT:</b> _____ (*Id.No./Date of Birth: _____)	

**PART A : AFFIDAVIT (To be completed by complainant)**

**1. PARTICULARS OF COMPLAINANT**

Surname :	
Full names :	
Id.No / Date of birth :	
Home or temporary address :	
Home/contact telephone number :	
Work address :	
Work telephone number :	
Occupation :	

**2. PARTICULARS OF PROTECTION ORDER**

A protection order was granted and a warrant of arrest authorised on :	(Date)
In the Magistrate`s Court at :	
Against :	(Name of Respondent)

**3. PARTICULARS OF RESPONDENT**

Surname :	
Full names :	
Id.No / Date of birth	
Home address :	
Home telephone number :	
Work address :	
Work telephone number :	

**4. PARTICULARS OF APPLICATION**

**4.1** I require a \*second/further warrant of arrest for my protection.

**4.2.** The existing warrant of arrest has been -

(a) \*executed and cancelled; or

(b)\*lost / destroyed, under the following circumstances:

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\_\_\_\_\_  
Signature of Deponent

\_\_\_\_\_  
Date

\*Delete whichever is not applicable

**PART B : CERTIFICATION** (for official use)

I hereby certify that before administering the \*oath / taking the affirmation I asked the Deponent the following questions and noted \*her/his answers in \*her/his presence as indicated below:-

(a) Do you know and understand the contents of the above declaration?

Answer \_\_\_\_\_.

(b) Do you have any objection to taking the prescribed oath?

Answer \_\_\_\_\_.

(c) Do you consider the prescribed oath to be binding on your conscience?

Answer \_\_\_\_\_.

I hereby certify that the Deponent has acknowledged that \*she/he knows and understands the contents of this declaration which was \*sworn to / affirmed before me, and the Deponent's \*signature / thumb print / mark was placed thereon in my presence.

Dated at \_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_.

\_\_\_\_\_  
**Justice of the Peace / Commissioner of Oaths**

Full Names \_\_\_\_\_

Designation \_\_\_\_\_

Area for which appointed \_\_\_\_\_

Work Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**\*Delete whichever is not applicable**