

## STATEMENT OF CLAIM

### COURT DETAILS

Court	Write 'Local Court'
#Division	Write 'Small Claims Division'
#List	Leave blank or delete
Registry	Write the location of the court where you will file your claim. For example, Downing Centre, Parramatta, Dubbo
Case number	The court will write the case number

### TITLE OF PROCEEDINGS

[First] plaintiff Delete 'First' if only one Plaintiff	<b>[name]</b>  Write your first name and family name if you are an individual.
#Second plaintiff #Number of plaintiffs (if more than two)  Delete this part if only one plaintiff. If two plaintiffs: delete the words 'Number of plaintiffs'. If three or more plaintiffs: delete the words 'Second plaintiff'.	<b>[#name #number]</b>  Refer to Party Details at rear for full list of parties] Delete this part if only one plaintiff. If two plaintiffs: write name of second plaintiff Delete 'Number' and 'Refer to Party Details at rear for full list of parties'. If three or more plaintiffs: write the total number of plaintiffs then write the name of each plaintiff under 'Further details about plaintiff' section below.
[First] defendant Delete 'First' if only one defendant	<b>[name]</b>  Write: <ul style="list-style-type: none"><li>• First name and family name of the defendant if the defendant is an individual</li></ul>
#Second defendant #Number of defendants (if more than two)  Delete if only one defendant. If two defendants: delete the words 'Number of defendants'. If three or more defendants: delete the words 'Second plaintiff'.	<b>[#name #number]</b>  Refer to Party Details at rear for full list of parties] Delete this part if there is only one defendant If two defendants: write name of second defendant as for first defendant. Delete 'Number' and 'Refer to Party Details at rear for full list of parties'. If three or more defendants: Write total number of defendants then write the name of each defendant under the 'details about defendants' section below.

## FILING DETAILS

Filed for [name] plaintiff[s] Write 'Your name, plaintiff'

Contact name and telephone [name] [telephone] If you are not represented by a lawyer this should be your own name and telephone number

Contact email [email address] Write your email address

## TYPE OF CLAIM

[Select type of claim from the list provided in section 6 of the Guide to preparing documents, available on the UCPR website [www.ucprforms.justice.nsw.gov.au](http://www.ucprforms.justice.nsw.gov.au) by clicking on the link to Publications, or at any NSW court registry]

You will need to select the type of claim that matches your claim, for example:

### **Mercantile Law - Bailment**

A claim arising from or relating to ownership of goods.

You can find a full list of matter types on the [Types of claims](#) on the UCPR website.

If you select the incorrect matter type, it will not affect your claim.

[on separate page]

[Note: If the completed RELIEF CLAIMED will fit in the available space appearing after TYPE OF CLAIM on the first page of this form, you may delete the page break, include the RELIEF CLAIMED on the first page and start this page with PLEADINGS AND PARTICULARS.]

## RELIEF CLAIMED

- 1 Write a brief statement of what orders you want the court to make, for example 'That the defendant return the goods listed in the pleadings and particulars or in the alternative, the defendant pay the plaintiff the total amount claimed below' Delete 2 or leave blank
- 2 Delete 2 or leave blank
- 3 Delete 3 or leave blank

[If you are making a liquidated claim (ie claiming a specific amount of money), include the following information:]

Amount of claim	\$ Write the total amount of your claim – the market value of the goods.
Interest	\$ Write the amount of interest claimed - you can only claim interest if your claim is \$1,000 or more. For more information, see Working out interest.
Filing fees	\$ Write the fee you paid for filing this form
Service fees	\$ Write the service fee (if applicable)
Solicitors fees	\$ Leave blank if you are representing yourself
TOTAL	\$ Add up all the amounts listed above and write the total

## PLEADINGS AND PARTICULARS

In this section you need to write a clear description of your claim in numbered paragraphs. Refer to yourself as the plaintiff, and to the person who has the goods as the defendant. You need to include:

- a clear description of the goods you are seeking to recover
- relevant dates – e.g. when the goods were left with the defendant
- the reason for your claim (e.g. defendant is refusing to return the goods or has disposed of the goods without plaintiff's knowledge)
- any agreement you had with the defendant about the goods
- the market value of the goods
- whether you are claiming interest and how the interest is calculated

1

2

## SIGNATURE

I acknowledge that court fees may be payable during these proceedings. These fees may include a hearing allocation fee.

Signature

Once you have completed the form, sign in this space

Capacity

[eg authorised officer, role of party] Write 'Plaintiff', or your capacity if signing on behalf of a company or organisation e.g. 'Director of Plaintiff' or 'Authorised Officer of Plaintiff'

Date of signature

Write the date you signed the form

## NOTICE TO DEFENDANT You do not need to fill in anything in these sections

**If you do not file a defence within 28 days of being served with this statement of claim:**

- **You will be in default in these proceedings.**
- **The court may enter judgment against you without any further notice to you.**

The judgment may be for the relief claimed in the statement of claim and for the plaintiff's costs of bringing these proceedings. The court may provide third parties with details of any default judgment entered against you.

## HOW TO RESPOND You do not need to fill in anything in these sections

**Please read this statement of claim very carefully. If you have any trouble understanding it or require assistance on how to respond to the claim you should get legal advice as soon as possible.**

You can get further information about what you need to do to respond to the claim from:

- A legal practitioner.
- LawAccess NSW on 1300 888 529 or at [www.lawaccess.nsw.gov.au](http://www.lawaccess.nsw.gov.au).
- The court registry for limited procedural information.

You can respond in one of the following ways:

- 1 If you intend to dispute the claim or part of the claim,** by filing a defence and/or making a cross-claim.
- 2 If money is claimed, and you believe you owe the money claimed, by:**
  - Paying the plaintiff all of the money and interest claimed. If you file a notice of payment under UCPR 6.17 further proceedings against you will be stayed unless the court otherwise orders.
  - Filing an acknowledgement of the claim.
  - Applying to the court for further time to pay the claim.

**3 If money is claimed, and you believe you owe part of the money claimed, by:**

- Paying the plaintiff that part of the money that is claimed.
- Filing a defence in relation to the part that you do not believe is owed.

Court forms are available on the UCPR website at [www.ucprforms.justice.nsw.gov.au](http://www.ucprforms.justice.nsw.gov.au) or at any NSW court registry.

#### **REGISTRY ADDRESS**

Street address [Write the address of the court where you are filing the form](#)

Postal address [Write the court PO Box, if any](#)

Telephone [Write the court telephone number](#)

[on separate page]

[Do not include the affidavit verifying in Local Court proceedings. See Guide to preparing documents for other circumstances where affidavit not required.]

**#AFFIDAVIT VERIFYING** [Delete this section or leave blank](#)

Name

Address

Occupation

Date

I [#say on oath #affirm]:

1 #I am the [first] plaintiff.

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

2 I believe that the allegations of fact in the statement of claim are true.

#SWORN #AFFIRMED at

Signature of deponent

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**):

1 #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.\*

2 #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) †

Signature of witness

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

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

[†"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.]

[on separate page]

**#PARTY DETAILS** Fill in this section if there are more than two plaintiffs and/or more than two defendants. Otherwise delete or leave blank.

[Include only if more than two plaintiffs and/or more than two defendants.]

### PARTIES TO THE PROCEEDINGS

#### Plaintiff[s]

#### Defendant[s]

[name] [role of party eg first plaintiff]

[name] [role of party eg first defendant]

[repeat as required for each additional plaintiff]

[repeat as required for each additional defendant]

### FURTHER DETAILS ABOUT PLAINTIFF[S]

#### [First] plaintiff

Name

Write your first name and family name

Address

#[unit/level number] #[building name]

[The filing party must give the party's address.]

[street number] [street name] [street type]

[suburb/city] [state/territory] [postcode]

#[country (if not Australia)] Write your street address

#Frequent user identifier

[include if the plaintiff is a registered frequent user] Delete

[repeat the above information as required for the second and each additional plaintiff]

#### Contact details for plaintiff[s] acting in person or by authorised officer

#Name of authorised officer

Delete, unless a company or incorporated association is the plaintiff and you are representing the company or association. In this case put your name.

#Capacity to act for plaintiff[s]

Delete, unless a company or incorporated association is the plaintiff and you are representing the company or association. In this case put your role e.g. director, secretary, public officer.

Address for service

#as above

[The filing party must give an address for service This must be an address in NSW unless the exceptions listed in UCPR 4.5(3) apply. State "as above" if the filing party's address for service is the same as the filing party's address stated above.]

#[unit/level number] #[building name]

[street number] [street name] [street type]

[suburb/city] [state/territory] [postcode] This is the address that you want the court to send documents to you. It should be an address in NSW. Delete everything apart from 'as above' if your mailing address is the same as your street address above. Otherwise, delete 'as above' and fill in your mailing address

Telephone

Write your phone number



#Fax [Write your fax no, or delete if you don't have a fax](#)

Email [Write your email address](#)

### DETAILS ABOUT DEFENDANT[S]

#### **[First] defendant**

Name [Write the name of defendant](#)

Address [#\[unit/level number\] #\[building name\]](#)  
[\[street number\] \[street name\] \[street type\]](#)  
[\[suburb/city\] \[state/territory\] \[postcode\]](#)  
[#\[country \(if not Australia\)\] \[Write the address for defendant\]\(#\)](#)

[repeat the above information as required for the second and each additional defendant]

[If there is more than one defendant repeat this section for each defendant.](#)