						PAKIA	- Cou	rt registry c	ору
REGISTRY AT	·:	MAGISTRATES COURT OF WESTERN AUSTRALIA (CIVIL JURISDICTION) APPLICATION UNDER WAREHOUSEMEN'S LIENS ACT 1952				e number: lodged:			
		s.10(2B)			Serv	ice type:			
			FORM 65						
Applicant	N	lame:							
	A	Address:				Pos	stcode	:	
Other Claim	nant/s	lame:							
(if any)	A	Address:				Pos	stcode	:	
Surplus Am	ount \$	3	Amou	nt of C	laim	\$			
Surplus de			Recei	pt num	ber				
date (if known))		(if knowr	n)					
SURPLUS I	S UNCER	TAIN	YMENT OF THE		NT OF			Court Seal	
Signature of ap	oplicant or					Date			
NOTICE OF	HEARING	G			FI	NANCI	AL D	ETAILS	
TAKE NOTICE that this application has been set down for a directions							\$		
hearing in the Magistrates Court held at:		urt fee rvice fee			\$ \$				
on day the day of Tra		avelling fee \$							
		wyer's co			\$				
am/pm.		То	tal amou	ınt of	claim	\$			
Address for service									
Contact details	Telephone:		Lawyer's ref:		Fax:		E ma	il:	

Case No of 20

FEES PAID

LODGEMENT OF CLAIM

LODGEMENT OF COUNTER/THIRD PARTY CLAIM

\$ Rec No	Date/	/20
Rec No		
\$ Rec No		/20

APPLICATIONS

\$ Rec No	Date	. /	/20
\$ Rec No	Date	./	/20
\$ Rec No	Date	/	/20

ASSESSMENT OF COSTS

\$......Date...../...../20

OTHER

\$ Rec No	Date/,	/20
\$ Rec No	Date/	/20
Rec No		

PART B - Claimant/s service copy

REGISTRY AT		MAGISTRATES COURT OF WESTERN AUSTRALIA (CIVIL JURISDICTION) APPLICATION UNDER WAREHOUSEMEN'S LIENS ACT 1952 s.10(2B) FORM 63			32	Case number: Date lodged: Service type:	
Applicant	Nam	e:					
	Addr	Address: Postcode:					
Other Claim	ant/s Nam	e:					
(if any)	Addr	ess:			Posto	ode:	
Surplus Am	ount \$		Amoun	t of Claim	\$		
Surplus dep date (if known)	osit		Receips (if known)	number			
SURPLUS IS	ORDER FOR	THE PA	YMENT OF THE A			Court Sea	lƙ
MY CLAIM/T Signature of ap		JS AWIOU	INT TO ME		Data		
lawyer					Date		
NOTICE OF	HEARING				FINANCIA Claim	L DETAILS	\$
TAKE NOTICE hearing in the N			een set down for a dire	ections	Court fee Service fee		\$ \$
on 20	day the)	day of	,	Travelling fee Lawyer's cost		\$ \$
am/pm.				Total amoun		\$ 	
Address for service							
	Telephone:		Lawver's ref:	Fax:	1 6	mail:	

			PART	С – Арр	olicant's copy	,	
REGISTRY AT:	MAGISTRATES COURT OF WESTERN AUSTRALIA (CIVIL JURISDICTION) APPLICATION UNDER WAREHOUSEMEN'S LIENS ACT 1952 s.10(2B)			Date	e number: lodged: ice type:		
	F	ORM 63					
Applicant	Name:						
	Address:			Postcode:			
Other Claimant/s	Name:						
(if any)	Address:			Postcode:	:		
Surplus Amount	\$	Amount of Claim		\$			
Surplus deposit		Receipt number					
date (if known)		(if known)					
THERE IS CONFLICTOR THE WAREHOUSE SURPLUS IS UNCE	CTING CLAIMS BY THI	E OTHER CLAIMAN IGHT TO THE OF THE AMOUNT O			Court Seal		
Signature of applicant of	r		Da	ate			
NOTICE OF HEARI	NG		FINΔN	CIAI D	ETAILS		
			Claim	JIAL D	LIAILU	\$	
TAKE NOTICE that this hearing in the Magistrate	application has been set doves Court held at:	wn for a directions	Court fee			\$	
	lay the day	v of	Service f			\$ ¢	
20	udy		Travellin Lawyer's	-		\$ \$	
a	m/pm.		-	nount of	claim	\$	

Lawyer's ref:

SEE OVER FOR FURTHER INFORMATION

Telephone:

Contact details

Address for service

E mail:

Fax:

NOTICE TO APPLICANT

LODGEMENT OF APPLICATION	This application must be lodged with a supporting affidavit which must include (but not limited to) the following –
	 a statement as to why the you are entitled to the surplus; (if known) the details of any person (an <i>other party</i>) who, to your knowledge, disputes your claim to the surplus; (if unknown) a statement of that effect.