

**MAGISTRATES COURT of WESTERN AUSTRALIA  
(CIVIL JURISDICTION)  
APPLICATION FOR DEFAULT JUDGMENT  
FORM 13**

<b>Registry:</b>	<b>Case number:</b>
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<b>Claimant</b>	
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<b>Defendant</b>	
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To: The Registrar

(\*Delete as applicable)

The \*claimant /\*defendant applies for judgment to be entered in this case against the \*defendant/\*claimant, having not lodged a response to a claim or a Statement of Defence within the prescribed time.

[List party] .....

Tick [✓] appropriate box

- Certificate of proof of service is lodged with this application
- Affidavit of service is lodged with this application
- Affidavit in support of unliquidated amount \$1001 to \$10000

**Details of claim:**

- 1.  Claim for liquidated amount \$
- 2.  Unliquidated amount less than \$1000 \$
- 3.  Unliquidated amount \$1001 to \$10000 \$
- 4.  Unliquidated amount in excess of \$10000 \$ to be assessed
- 5.  Delivery of goods \$ to be assessed
- 6.  Costs on claim \$
- 7.  Interest (*see below for calculation*) \$
- 8.  Lawyer's costs for this application \$ \_\_\_\_\_
- Sub total \$ \_\_\_\_\_
- Less monies paid \$ \_\_\_\_\_
- Total \$ \_\_\_\_\_

Interest calculation from ...../...../..... to ...../...../..... at .....% being ..... days at a daily rate of \$.....

**Hearing by the court where unspecified amount must be assessed**

My/our unavailable dates to attend a hearing are: .....

Filing fee \$..... enclosed for court to hear and assess amount of claim.

Estimated hearing time is .....

Date: ..... Claimant/Defendant or lawyer:

.....

Date: ..... Judgment given for \$ .....

Registrar

Lodged by	<input type="checkbox"/> Claimant or claimant's lawyer <input type="checkbox"/> Defendant or defendant's lawyer <input type="checkbox"/> Other ...			
Address for service	..... .....			
Contact details	Telephone:	Lawyer's ref:	Fax:	E mail: