

**MAGISTRATES COURT of WESTERN AUSTRALIA
(CIVIL JURISDICTION)
FORM 15C - RESPONSE TO THIRD PARTY CLAIM**

Registry:	Case number:
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Claimant	
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Defendant	
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Third Party	
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(Must enter full name of party responding)
I,

PART D - INTENTION TO DEFEND THIRD PARTY CLAIM

intend to defend this claim.

Third party or lawyer:	Date:
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Responding party must complete the below address for service and contact information

Address for service				
Contact details	Telephone:	Lawyer's ref:	Fax:	E mail: