

REGISTRY AT:	MAGISTRATES COURT of WESTERN AUSTRALIA (CIVIL JURISDICTION) FORM 7 - GENERAL PROCEDURE CLAIM (CONSUMER/TRADER)	Case number: Date lodged:
---------------------	---	--

Claimant <input type="checkbox"/> Consumer <input type="checkbox"/> Trader (full trading name)	Name:	Postcode:
	Address:	

Defendant <input type="checkbox"/> Consumer <input type="checkbox"/> Trader (full trading name)	Name:	Postcode:
	Address:	

See PART C for information

CLAIMANT’S ADDRESS FOR SERVICE	
<i>Tick [✓] appropriate box and insert address details below:</i>	
<input type="checkbox"/> Residential or principal place of business address:	
<input type="checkbox"/> Registered Office address:	
<input type="checkbox"/> Lawyer – principal place of business address	
METHOD OF SERVICE	
<i>Tick [✓] appropriate box</i> <input type="checkbox"/> Claimant <input type="checkbox"/> Bailiff	
CONTACT DETAILS	
Claimant ref:	
Telephone:	Fax:
Email:	

Amount of claim:	\$
Court filing fee:	\$
Service fee:	\$
Travelling fee:	\$
Lawyer’s letter of demand: <i>(claim exceeding \$10000)</i>	\$
Lawyer’s costs: <i>(claim exceeding \$10000)</i>	\$
Total claimed:	\$
Re-issue / /	\$
Total claimed:	\$
Extra fees:	\$

Signature: claimant or lawyer	
---	--

Court Seal

REMEDY OR RELIEF SOUGHT <input type="checkbox"/> <i>tick [✓] appropriate box</i>	
<input type="checkbox"/> The performance of work	<input type="checkbox"/> The provision of services
<input type="checkbox"/> The payment of an amount of money	<input type="checkbox"/> The relief from payment of an amount of money
<input type="checkbox"/> The return of goods	<input type="checkbox"/> The replacement of goods
DESCRIPTION OF CLAIM: is as follows (or attached)	

PART B – Claimant’s copy

REGISTRY AT:	MAGISTRATES COURT of WESTERN AUSTRALIA (CIVIL JURISDICTION) FORM 7 - GENERAL PROCEDURE CLAIM (CONSUMER/TRADER)	Case number: Date lodged:
---------------------	---	--

Claimant <input type="checkbox"/> Consumer <input type="checkbox"/> Trader (full trading name)	Name:
	Address: Postcode

Defendant <input type="checkbox"/> Consumer <input type="checkbox"/> Trader (full trading name)	Name:
	Address: Postcode

See PART C for information

<p>CLAIMANT’S ADDRESS FOR SERVICE <i>Tick [✓] appropriate box and insert address details below:</i></p> <p><input type="checkbox"/> Residential or principal place of business address: <input type="checkbox"/> Registered Office address: <input type="checkbox"/> Lawyer – principal place of business address</p> <p>METHOD OF SERVICE <i>Tick [✓] appropriate box</i> <input type="checkbox"/> Claimant <input type="checkbox"/> Bailiff</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>Amount of claim:</td><td style="text-align: right;">\$</td></tr> <tr><td>Court filing fee:</td><td style="text-align: right;">\$</td></tr> <tr><td>Service fee:</td><td style="text-align: right;">\$</td></tr> <tr><td>Travelling fee:</td><td style="text-align: right;">\$</td></tr> <tr><td>Lawyer’s letter of demand: <i>(claim exceeding \$10000)</i></td><td style="text-align: right;">\$</td></tr> <tr><td>Lawyer’s costs: <i>(claim exceeding \$10000)</i></td><td style="text-align: right;">\$</td></tr> <tr><td>Total claimed:</td><td style="text-align: right;">\$</td></tr> <tr><td>Re-issue / /</td><td style="text-align: right;">\$</td></tr> <tr><td>Total claimed:</td><td style="text-align: right;">\$</td></tr> <tr><td>Extra fees:</td><td></td></tr> </table>	Amount of claim:	\$	Court filing fee:	\$	Service fee:	\$	Travelling fee:	\$	Lawyer’s letter of demand: <i>(claim exceeding \$10000)</i>	\$	Lawyer’s costs: <i>(claim exceeding \$10000)</i>	\$	Total claimed:	\$	Re-issue / /	\$	Total claimed:	\$	Extra fees:	
Amount of claim:	\$																				
Court filing fee:	\$																				
Service fee:	\$																				
Travelling fee:	\$																				
Lawyer’s letter of demand: <i>(claim exceeding \$10000)</i>	\$																				
Lawyer’s costs: <i>(claim exceeding \$10000)</i>	\$																				
Total claimed:	\$																				
Re-issue / /	\$																				
Total claimed:	\$																				
Extra fees:																					
CONTACT DETAILS																					
Claimant ref:																					
Telephone: <input style="width: 150px;" type="text"/> Fax: <input style="width: 100px;" type="text"/>																					
Email: <input style="width: 200px;" type="text"/>																					

Signature: claimant or lawyer	
--	--

Court Seal

See Part C for information	
REMEDY OR RELIEF SOUGHT <input type="checkbox"/> <i>tick [✓] appropriate box</i>	
<input type="checkbox"/> The performance of work	<input type="checkbox"/> The provision of services
<input type="checkbox"/> The payment of an amount of money	<input type="checkbox"/> The relief from payment of an amount of money
<input type="checkbox"/> The return of goods	<input type="checkbox"/> The replacement of goods
DESCRIPTION OF CLAIM: is as follows (or attached)	

PART C – INFORMATION FOR CLAIMANT

PLEASE READ THIS FORM THOROUGHLY

The following information is a guide only. For legal advice you should see a lawyer

Procedural fact sheets are available at www.magistratescourt.wa.gov.au as well as at any Magistrates Court Registry.

CLAIMANT	<ul style="list-style-type: none">Your full name or the full name of your company or business.
DEFENDANT	<ul style="list-style-type: none">The full name or the name of the company or business you are issuing the claim against.
METHOD OF SERVICE	<ul style="list-style-type: none">You may choose to have the claim served by a bailiff (bailiff service), or you may choose to serve the claim yourself (claimant service). If you elect to serve the claim by bailiff service, service fees apply. If you elect to serve the claim by claimant service there are service rules to follow.Information on how to serve a claim can be located at www.magistratescourt.wa.gov.au or by contacting a Magistrates Court registry.
CONSUMER/TRADER CLAIM	<ul style="list-style-type: none">A consumer/trader claim is a claim that arises out of a contract for the supply of goods or the provision of services between a consumer and a trader.You are a trader if you supply goods or services as part of your business.You are a consumer if you are a natural person who has hired or bought goods or services for private use.
DETAILS OF CLAIM	<ul style="list-style-type: none">A description of the dispute between the consumer and the trader (e.g. date of transaction, date when problem arose and details of the transaction or problem).
RELIEF REQUIRED	<ul style="list-style-type: none">If claiming monetary relief then you must state the value of your claim. The court registry will assess fees applicable. Applicable fees paid will be added to your claim amount to reveal a total amount of claim
STATEMENT OF CLAIM	<ul style="list-style-type: none">If the defendant has lodged a notice of intention to defend, you will be given notice by the court along with a copy of the defendant's response and statement of defence if lodged at the same time as the defendant's response.If you did not lodge and serve a statement of claim at the time you lodged your claim and you are given notice by the court that the defendant intends to defend, you must within 14 days of receipt of the notice of intention to defend, lodge and serve a statement of claim.The defendant must, within 14 days after you have lodged and served a statement of claim, lodge and serve a statement of defence.The defendant at the time of lodging the statement of defence must lodge and serve any counterclaim or third party claim. You must within 14 days of receipt of a counterclaim lodge a response.You must within 14 days after the defendant lodges and serves a statement of defence, request a registrar to list the case for a pre-trial conference and pay the prescribed fee.
SIGNATURE	<ul style="list-style-type: none">It is necessary for you to sign each copy of the claim form within this package.
ADDRESS FOR SERVICE	<ul style="list-style-type: none">This is the address to which the court and the defendant will send/serve documents and notices on you.A document lodged in relation to a case must contain a residential or business address for service or in the case of a corporation, registered office or principal place of business.To enable service of documents electronically (where personal service is not required), an email address may be provided in addition to the above
CONTACT DETAILS	<ul style="list-style-type: none">It is suggested that you include a contact number, which will allow the defendant or court to contact you if the need arises.

REGISTRY AT:	MAGISTRATES COURT of WESTERN AUSTRALIA (CIVIL JURISDICTION) FORM 7 - GENERAL PROCEDURE CLAIM (CONSUMER/TRADER)	Case number: Date lodged:
---------------------	---	--

Claimant <input type="checkbox"/> Consumer <input type="checkbox"/> Trader (full trading name)	Name:
	Address: Postcode

Defendant <input type="checkbox"/> Consumer <input type="checkbox"/> Trader (full trading name)	Name:
	Address: Postcode

See PART E for information

CLAIMANT’S ADDRESS FOR SERVICE <i>Tick [✓] appropriate box and insert address details below:</i> <input type="checkbox"/> Residential or principal place of business address: <input type="checkbox"/> Registered Office address: <input type="checkbox"/> Lawyer – principal place of business address METHOD OF SERVICE <i>Tick [✓] appropriate box</i> <input type="checkbox"/> Claimant <input type="checkbox"/> Bailiff								
CONTACT DETAILS								
Claimant ref:								
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px solid black;">Telephone:</td> <td style="width:30%; border-bottom: 1px solid black;"></td> <td style="width:30%; border-bottom: 1px solid black;">Fax:</td> <td style="width:10%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Email:</td> <td colspan="3" style="border-bottom: 1px solid black;"></td> </tr> </table>	Telephone:		Fax:		Email:			
Telephone:		Fax:						
Email:								

Amount of claim:	\$
Court filing fee:	\$
Service fee:	\$
Travelling fee:	\$
Lawyer’s letter of demand: <i>(claim exceeding \$10000)</i>	\$
Lawyer’s costs: <i>(claim exceeding \$10000)</i>	\$
Total claimed:	\$
Re-issue / /	\$
Total claimed:	\$
Extra fees:	

Signature: claimant or lawyer	
--	--

Court Seal

See Part E for information REMEDY OR RELIEF SOUGHT <input type="checkbox"/> <i>tick [✓] appropriate box</i>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;"><input type="checkbox"/> The performance of work</td> <td style="width:50%; border-bottom: 1px solid black;"><input type="checkbox"/> The provision of services</td> </tr> <tr> <td style="border-bottom: 1px solid black;"><input type="checkbox"/> The payment of an amount of money</td> <td style="border-bottom: 1px solid black;"><input type="checkbox"/> The relief from payment of an amount of money</td> </tr> <tr> <td style="border-bottom: 1px solid black;"><input type="checkbox"/> The return of goods</td> <td style="border-bottom: 1px solid black;"><input type="checkbox"/> The replacement of goods</td> </tr> </table>	<input type="checkbox"/> The performance of work	<input type="checkbox"/> The provision of services	<input type="checkbox"/> The payment of an amount of money	<input type="checkbox"/> The relief from payment of an amount of money	<input type="checkbox"/> The return of goods	<input type="checkbox"/> The replacement of goods
<input type="checkbox"/> The performance of work	<input type="checkbox"/> The provision of services					
<input type="checkbox"/> The payment of an amount of money	<input type="checkbox"/> The relief from payment of an amount of money					
<input type="checkbox"/> The return of goods	<input type="checkbox"/> The replacement of goods					
DESCRIPTION OF CLAIM: is as follows (or attached)						

PART E – INFORMATION FOR DEFENDANT

PLEASE READ THIS FORM THOROUGHLY

The following information is a guide only. For legal advice you should see a lawyer

Procedural fact sheets are available at www.magistratescourt.wa.gov.au as well as at any Magistrates Court Registry.

- The table below provides types of responses that are available to you.
- You must complete and lodge with the court a response to this claim within 14 days of service of the claim on you, unless your address for service is outside Western Australia, in which case you have 21 days.
- Failure to respond to the claim within the prescribed time may result in the claimant obtaining a default judgment against you.

PAYING THE CLAIM IN FULL	<ul style="list-style-type: none">• If you elect to pay the claim in full, the payment must be made direct to the claimant or their lawyer.
IF YOU ADMIT THE CLAIM AND ARE UNABLE TO PAY IN FULL	<ul style="list-style-type: none">• You should complete an admission of the claim in the relevant section of Part F of the forms you have been served with.• You may wish to contact the claimant or their lawyer to confirm acceptance of your offer to pay by instalments.• The court will notify the claimant of your admission. It is the decision of the claimant as to whether your offer to pay by instalments is accepted.• If the claimant does not accept your admission to pay by instalments they may proceed to enforce payment against you without further notice.• All instalment payments made must be paid direct to the claimant or their lawyers.
IF YOU ADMIT TO PART OF THE CLAIM	<ul style="list-style-type: none">• You may wish to contact the claimant or their lawyer to see whether a settlement can be arranged by consent. If an agreement is made, a memorandum of consent order form signed by all parties may be provided to the court registry.• If you cannot reach agreement with the claimant to settle the claim, complete Part F – Intention to Defend.• This form must then be lodged at the registry of the Magistrates Court from where this claim was issued with the prescribed time.
IF YOU RESPOND BY: GIVING INTENTION TO DEFEND THE CLAIM or LODGING A COUNTERCLAIM OR THIRD PARTY CLAIM	<ul style="list-style-type: none">• If you are giving notice of intention to defend, complete Part F – Intention to Defend and lodge at the Magistrates Court registry that issued the claim. The court will give notice of your intention to defend and a copy of your response to the claimant.• If the original claim was served on you with a statement of claim and you are giving notice of intention to defend, you must within 14 days of being served not only lodge your defence response but also lodge a statement of defence. The court will give notice of your intention to defend and a copy of your response to the claimant as well as provide you the sealed statement of defence to serve on the claimant.• If you wish to make a counterclaim or a third party claim, you must lodge either a Form No 68 or a Form No 9. A third party claim must be lodged and served with your statement of defence or Statement of Defence and Counterclaim. A fee is payable for lodging a counterclaim or third party claim.• If you wish to make an application for the proceedings in the case to be conducted at another place in the state of Western Australia, you must complete Part F – Intention to Defend and Part G – Application for Change of Venue.• If the claimant did not lodge and serve on you a statement of claim with their originating claim the claimant must, within 14 days of receipt of your notice of intention to defend, lodge and serve a statement of claim.• You must, within 14 days of receipt of the statement of claim, lodge and serve a statement of defence.• Once you lodged and served your statement of defence on the claimant, the claimant has 14 days from the date of service to request a registrar to list the case for a pre-trial conference (prescribed fees applicable).
ADDRESS FOR SERVICE	<ul style="list-style-type: none">• This is the address to which the court and the claimant will send/serve documents and notices on you.• A document lodged in relation to a case must contain a residential or business address for service or in the case of a corporation, registered office or principal place of business.• To enable service of documents electronically (where personal service is not required), an email address may be provided in addition to the above
CONTACT DETAILS	<ul style="list-style-type: none">• It is suggested that you include a contact number, which will allow the claimant or court to contact you if the need arises.

**MAGISTRATES COURT of WESTERN AUSTRALIA
(CIVIL JURISDICTION)
FORM 15D - RESPONSE TO GENERAL PROCEDURE CLAIM
(CONSUMER/TRADER)**

Registry:	Case number:
------------------	---------------------

Claimant	
-----------------	--

Defendant	
------------------	--

(Must enter full name of party responding)
I,

PART F -ADMISSION OF GENERAL PROCEDURE CLAIM (CONSUMER/TRADER)

Tick [✓] appropriate box

admit to the total amount claimed and I offer to pay the amount admitted by way of:

instalment amounts of \$
 weekly; or
 fortnightly; or
 monthly

First instalment *(date)*:

OR

payment in full on or before *(date)*:

OR

PART F- INTENTION TO DEFEND GENERAL PROCEDURE CLAIM

Tick [✓] appropriate box

intend to defend the full amount of this claim; or

admit liability for part of the claim made and intend to defend the balance of the claim.

I offer the sum of \$ as full satisfaction of the claim.

PART G -APPLICATION FOR CHANGE OF VENUE

Tick [✓] appropriate box if applicable

make application to the Court for an order that the proceedings in this case be conducted at another venue within the State of Western Australia:

Name of proposed Court venue:

(If selected, complete Part G - Affidavit in Support of Change of Venue Application over page)

Defendant or lawyer:	Date:
----------------------	-------

The responding party must complete the below address for service and contact information

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

**MAGISTRATES COURT of WESTERN AUSTRALIA
(CIVIL JURISDICTION)
FORM 15D - RESPONSE TO GENERAL PROCEDURE CLAIM
(CONSUMER/TRADER)**

Registry:	Case number:
Claimant	
Defendant	

PART G – AFFIDAVIT IN SUPPORT OF CHANGE OF VENUE APPLICATION

I (full name)

of (residential/business address)

(occupation)

(Select as applicable)

Having been duly: sworn or affirmed, say on: oath or affirmation, the following:

(Enter information in support of change of venue application)

(Select as applicable)

SWORN or AFFIRMED

at _____

this _____ day of _____ 20_____

in the presence of (witness name) _____

Registrar/Justice of the Peace/other authorised witness

Deponent's signature

**The application to change venue will be determined at Magistrates Court held at _____
on _____ day the _____ day of _____ 20_____ at _____ am/pm.**

Unless the court orders otherwise, the attendance of the parties is not required for this application.

In the event attendance is required, the court will provide notice to parties.

If you have been served with an application for change of venue you must, at least three working days before the hearing of the application, lodge and serve a response to the application stating whether you consent or object to the order sought in this application.

If you do not consent to the order sought in this application, you must also lodge an affidavit supporting your response and any related application.

Magistrates Court forms and information fact sheets are located at website: www.magistratescourt.wa.gov.au