

## Claim form for relief against forfeiture

In the	
Claim no.	
Fee Account no.	

THE PROPERTY OF THE PROPERTY O					
Claimant					SEAL
Defendant(s)					
The claimant is interested in the lease dated			20 , of the property:		
The defendant, as the person entitled to the reversion o served notice of intention to forfeit the lease.		on the lease, on	20 , forfeited or		
The claimant se	eeks relief from that forfeiture so that th	ne lease can contir	nue.		
Full particulars	of the claim are [overleaf][attached].				
The claim will	be heard on:		20	at	am/pm
at					
Defendant's name and			Cou	rt fee	£
address (including postcode)		Legal Represer			
for service		-	Total am	nount	£
			Issue	date	

Claim no.	
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Particulars of Claim [are attached]

Statement of Truth			
*(I believe)(The claimant believes) that the facts stated in this claim form are true. * I am duly authorised by the claimant to sign this statement.			
signed date			
*(Claimant)(Litigation friend )(Claimant's legal representative)			
Full name			
Name of claimant's legal representative's firm			
position or office held			

Claimant's or claimant's legal representative's address to which documents should be sent if different from overleaf.

Po	ostcode

	If applicable
Ref. no.	
fax no.	
DX no.	
e-mail	
Tel. no.	