Defence and Counterclaim (unspecified amount, non-money and return of goods claims)

- Fill in this form if you wish to dispute all or part of the claim and/or make a claim against the claimant (a counterclaim)
- You have a limited number of days to complete and return this form to the court.
- Before completing this form, please read the notes for guidance attached to the claim form.
- Please ensure that all the boxes at the top right of this form are completed. You can obtain the correct names and number from the claim form. The court cannot trace your case without this information.

How to fill in this form

- Set out your defence in section 1. If necessary continue on a separate piece of paper making sure that the claim number is clearly shown on it. In your defence you must state which allegations in the particulars of claim you deny and your reasons for doing so. If you fail to deny an allegation it may be taken that you admit it.
- If you dispute only some of the allegations you must
 specify which you admit and which you deny; and
- give your own version of events if different from the claimant's.
- If the claim is for money and you dispute the claimant's statement of value, you must say why and if possible give your own statement of value.

1. Defence

| Name of co | urt |
|------------------------------|-----|
| Claim No. | |
| Claimant (including ref.) | |
| Defendant | |

- If you wish to make a claim against the claimant (a counterclaim) complete section 2.
- Complete and sign section 3 before returning this form.

Where to send this form

- send or take this form immediately to the court at the address given on the claim form.
- Keep a copy of the claim form and the defence form.

Need help with your legal problems?

Community legal advice is a free confidential service, funded by legal aid. They can help you find the information and advice you need by putting you in touch with relevant agencies, helplines or local advice services. And if you are eligible for legal aid, the service can offer specialist legal advice over the telephone in cases involving: debt; housing; employment; benefits; and education

Call 0845 345 4 345 or www.communitylegaladvice.org.uk

| | Claim No. | | | |
|---|---------------|-------------|--|--|
| Defence (continued) | | | | |
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| 2. If you wish to make a claim against the claimant (a | | | | |
| To start your counterclaim, you will have to pay a fee. Court staff can tell you how much you have to pay. You may not be able to make a counterclaim where the claimant is the Crown (e.g. a Government Department). Ask at your local county court office for further information. | | | | |
| If your claim is for a specific sum of money, how much | ng? £ | | | |
| I enclose the counterclaim fee of | £ | | | |
| My claim is for (please specify nature of claim) | | | | |
| | | | | |
| What are your reasons for making the counterclaim? | | | | |
| If you need to continue on a separate sheet put the claim number in the top right hand corner. | | | | |
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| | | | | |
| 3. Signed - To be signed by you or by your solicitor or litic | ation friend. | | | |
| *(I believe) (The defendant believes) that the facts stated in this form are true. (If signing on behalf of | | | | |
| *I am duly authorised by the defendant to sign this statement. | | | | |
| | *delete as | appropriate | | |
| Date / / / | | | | |
| | | | | |
| Defendant's date of birth, if an individual | | | | |
| Give an address to which notices about this case can be sent to you If applicable | | | | |
| | Telepho | | | |
| | Fax no. | | | |
| Postcode | DX no. | | | |
| E-mail | | | | |