

NOTICE OF MOTION WRIT FOR THE DELIVERY OF GOODS

COURT DETAILS

Court

#Division

#List

Registry

Case number

TITLE OF PROCEEDINGS

[First] plaintiff **[name]**

#Second plaintiff #Number of
plaintiffs (if more than two)

[First] defendant **[name]**

#Second defendant #Number of
defendants (if more than two)

JUDGMENT DETAILS

Date of judgment to be enforced

FILING DETAILS

Person seeking orders **[name]** [role of party eg plaintiff]

#Filed in relation to [eg plaintiff's claim, (number) cross-claim]
[include only if form to be eFiled]

#Legal representative [solicitor on record] [firm]

#Legal representative reference [reference number]

Contact name and telephone [name] [telephone]

PERSON AFFECTED BY ORDERS SOUGHT

[name] [role of party eg defendant]

HEARING DETAILS

This motion is to be dealt with in the absence of the parties.

[on separate page]

ORDERS SOUGHT

The issue of a writ for the delivery of the following goods:

1 [list goods]

SIGNATURE

#Signature of legal representative

#Signature of or on behalf of
party if not legally represented

Capacity [eg solicitor, authorised officer, role of party]

Date of signature

[on separate page]

AFFIDAVIT

Name

Address

Occupation

Date

I [#say on oath #affirm]:

1 #I am the plaintiff.

#I am [give details of the capacity of the person making the affidavit and the facts that qualify the person to make the affidavit].

2 #None of the goods claimed in the statement of claim have been delivered to the plaintiff since the time judgment was given.

#The following goods have not been delivered to the plaintiff since the time the judgment was given and the plaintiff seeks a writ for the delivery of these goods:

[list goods]

3 #No payments have been made by the defendant to the plaintiff in respect of the goods since the time judgment was given.

#The amount paid by the defendant to the plaintiff in respect of the goods since the time judgment was given is \$[amount].

4 The amounts claimed for costs in respect of this writ are:

Execution fees \$

Solicitors fees \$

TOTAL \$

5 I believe that the goods to be delivered are located at the following address[es]:
[state address(es)].

6 I believe that goods that might be seized for payment are located at the following address[es]: [state address(es)].

#SWORN #AFFIRMED at

Signature of deponent

Signature of witness

Name of witness

Address of witness

Capacity of witness [#Justice of the peace #Solicitor #Barrister #Commissioner for affidavits #Notary public]

Note: The deponent and witness must sign each page of the affidavit. See UCPR 35.7B.

[Include the following additional information, if known, which will assist the Sheriff when executing the writ.]

ADDITIONAL INFORMATION TO ASSIST SHERIFF'S OFFICE

Short description of claim

Best time of day to contact the defendant

Defendant's telephone number (if known)

Provide specific details of any property owned by the defendant

Are there any animals or anything else at the premises that might pose a threat to the health and safety of Sheriff's officers?