

DEFENCE

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)

FILING DETAILS

Filed for **[name]** [role of party eg defendant]

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

Contact name and telephone **[name]** [telephone]

PLEADINGS AND PARTICULARS

1 []

2 []

SIGNATURE

Signature

Capacity [eg authorised officer, role of party]

Date of signature

[on separate page]

[Do not include the affidavit verifying in Local Court proceedings or in Supreme or District Court proceedings for the recovery of damages for defamation, malicious prosecution, false imprisonment, trespass to the person, death or personal injury or if verification has been dispensed with by the court.]

#AFFIDAVIT VERIFYING

Name

Address

Occupation

Date

I [#say on oath #affirm]:

1 #I am the [first] defendant.

#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 I believe that the allegations of fact contained in the defence are true.

3 I believe that the allegations of fact that are denied in the defence are untrue.

4 After reasonable inquiry, I do not know whether or not the allegations of fact that are not admitted in the defence are true.

#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]

[on separate page]

[Do not include this section if you have previously given this information to the court in these proceedings.]

#FURTHER DETAILS ABOUT FILING PARTY**Filing party**

Name

Address

[The filing party must give the party's address.]

#[unit/level number]

#[building name]

[street number]

[street name]

[street type]

[suburb/city]

[state/territory]

[postcode]

#[country (if not Australia)]

#Frequent user identifier

[include if the filing party is a registered frequent user]

Contact details for filing party acting in person or by authorised officer

#Name of authorised officer

#Capacity to act for filing party

Address for service

[The filing party must give an address for service. This must be an address in NSW unless the exceptions listed in UCPR 4.5(3) apply. State "as above" if the filing party's address for service is the same as the filing party's address stated above.]

#as above

#[unit/level number]

#[building name]

[street number]

[street name]

[street type]

[suburb/city]

[state/territory]

[postcode]

#Telephone

#Fax

#Email