

CLAIM

Magistrates Court of South Australia (Civil Division)

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Court Use

Date Filed
Date of Posting
PI MVA – Served Allianz:

Trial Court					Action No		
Address	Street			Telephone	Facsimile	DX	
	City/Town/Suburb		State	Postcode	Email Address		

Amount Claimed (if any)	\$
Court Fee on Filing	\$
Service and Other Fee	\$
Solicitor's Fee	\$
TOTAL CLAIMED	\$

Type of claim (tick)

- | | | |
|---|--|--|
| <input type="checkbox"/> Building | <input type="checkbox"/> Contract | <input type="checkbox"/> Corporations Law |
| <input type="checkbox"/> Criminal Assets Confiscation | <input type="checkbox"/> Debt | <input type="checkbox"/> Equity |
| <input type="checkbox"/> Motor Vehicle Property | <input type="checkbox"/> Personal Injury Motor Vehicle | <input type="checkbox"/> Other Personal Injury |
| <input type="checkbox"/> Retail and Commercial Lease | <input type="checkbox"/> Workers Lien | <input type="checkbox"/> Debt – Tribunal Order |
| <input type="checkbox"/> Detinue | <input type="checkbox"/> Construction Contract Payment | <input type="checkbox"/> Other (specify) |

This claim is liquidated unliquidated**Method of service (tick)**

-
- Registrar
-
- Sheriff
-
- Plaintiff's Solicitor
-
- Party

Plaintiff/s

Full Name							
Address <small>(Registered Office, if Body Corporate)</small>	Street			Telephone	Facsimile	DX	
	City/Town/Suburb		State	Postcode	Email Address		
Solicitor for Plaintiff/s (name)							
Address	Street			Telephone	Facsimile	DX	
	City/Town/Suburb		State	Postcode	Email Address		

Defendant/s

Full Name							
Address <small>(Registered Office, if Body Corporate)</small>	Street			Telephone	Facsimile	DX	
	City/Town/Suburb		State	Postcode	Email Address		
Solicitor for Defendant/s (name)							
Address	Street			Telephone	Facsimile	DX	
	City/Town/Suburb		State	Postcode	Email Address		

PARTICULARS: State what you want from the Court. Briefly state the date, place and circumstances from which the claim arose. Where the claim is for damages the amount claimed for each head of damages must be given (e.g. an amount for pain and suffering or economic loss etc.). The plaintiff or his/her solicitor must sign and date each page. There are cost penalties for making an unsuccessful claim or counterclaim.

.....
Date

.....
PLAINTIFF

DEFENDANT/S - If you have a defence or counterclaim you must, within 21 days from service of this claim, go to your nearest court and file a defence and/or counterclaim.

TAKE THIS FORM WITH YOU

**If you do nothing, the plaintiff may get judgment against you.
If you consent to judgment, please sign and return this form to the Trial Court (address above).**

I, consent to judgment for the total claimed.

.....
Date

.....
DEFENDANT

AFFIDAVIT OF PROOF OF SERVICE

I,	of
Occupation:	
MAKE OATH AND SAY that:	
<p>I. I did on the day of 20 , between the hours of and duly serve the within named defendant with this claim and Form 17 and any applicable form under the <i>Service and Execution of Process Act 1992 (Cth).</i></p>	
<p>(Please tick the appropriate box)</p> <p><input type="checkbox"/> By personal service on the person.</p> <p><input type="checkbox"/> By service on the solicitor acting for the person.</p> <p><input type="checkbox"/> By leaving it for the person at the address of the place of dwelling or business of the person with someone apparently above the age of 14 years.</p> <p><input type="checkbox"/> By depositing it for the person at the DX addressed to the DX number of the person or the solicitor acting for the person.</p> <p><input type="checkbox"/> By leaving it at the registered office of the body corporate.</p> <p><input type="checkbox"/> By sending it by prepaid post addressed to the strata corporation at its site or its post office box.</p> <p><input type="checkbox"/> By prepaid post addressed to the community corporation or to the presiding officer, treasurer or secretary at the postal address of the community corporation or by placing it in the community corporation's letterbox.</p> <p><input type="checkbox"/> By fax directed to the fax number of the person or the solicitor acting for the person during normal business hours on a business day.</p> <p><input type="checkbox"/> By service on one partner or at the principal place of business of the firm.</p> <p><input type="checkbox"/> By sending it by prepaid post addressed to the person at -</p> <p style="padding-left: 20px;">(note - unless the court is satisfied that the document served by this method came to the attention of the defendant the plaintiff is not entitled to costs thrown away if the judgment is set aside-rule 106(8))</p> <p><input type="checkbox"/> By</p> <p style="padding-left: 20px;">(here describe any other authorised means of service)</p>	
<p>II. I served the person at (state the address, DX number, fax number etc.)</p>	
<p>III. I necessarily made trips and travelled kilometres for the purpose of effecting the service.</p>	
<p>SWORN before me at</p> <p>on the day of 20</p> <p>Signature</p> <p style="text-align: center;">(Person authorised to take Affidavits) (e.g. Justice of the Peace)</p>	<p>.....</p> <p style="text-align: center;">SERVER</p>