MINOR CIVIL ACTION - 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			Teleph	one	Facsimile	DX
Address	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 clain	n (tick)						
☐ Building	☐ Contract ☐ Corporations Law						
☐ Debt	□ м	☐ Motor Vehicle Property ☐ Personal Injury Motor Vehicle					
Other Per		ebt – Tribunal C	-			nstruction Contract	
☐ Other (sp							•
Method of s	ervice (tick)						
☐ Registrar	☐ Sheriff] Plain	tiff's S	olicitor	☐ Party	
Plaintiff/s							
Full Name							
Address (Registered Office, if Body Corporate)	Street			Teleph	one	Facsimile	DX
City/Town/Suburb State Postcode Email Address Solicitor for Plaintiff/s (name) (A solicitor is not required – the solicitor cannot appear at trial)							
•							
Address	Street			Teleph	one I	Facsimile	DX
	City/Town/Suburb	State	Postcode		Email Address		
Defendant/s							
Full Name							
Address	99						
(Registered Office,	Street			Teleph	one	Facsimile	DX
if Body Corporate)	City/Town/Suburb	State	Postcode		Email Address		
Solicitor for Defendant/s (name) (A solicitor is not required – the solicitor cannot appear at trial)							
Address	Ctroat			Telephone Facsimile DX			
	Street						
	City/Town/Suburb	State	Postcode		Email Address		

claim arose. Where the claim is for damages the amount	riefly state the date, place and circumstances from which the claimed for each head of damages must be given (e.g. an explaintiff or his/her solicitor must sign and date each page. In or counterclaim.							
Date	PLAINTIFF							
	m you must, within 21 days from <u>service</u> 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,	l, of							
Occupation:								
MAKE OATH AND SAY that:								
I.	I did on the day of	20 , between t	the hours of and duly serve the					
	within named defendant	named defendant with this claim and Form 17 and any applicable form under the						
	Service and Execution of Process Act 1992 (Cth).							
(Plea	(Please tick the appropriate box)							
	By personal service on the person.							
	By service on the solicitor acting for the person.							
	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.							
	By depositing it for the person at the DX addressed to the DX number of the person or the solicitor acting for the person.							
	By leaving it at the registered office of the body corporate.							
	By sending it by prepaid post addressed to the strata corporation at its site or its post office box.							
	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.							
	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.							
	By service on one partner or at the principal place of business of the firm.							
	By sending it by prepaid post addressed to the person at -							
	(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))							
	Ву							
	(here describe any other authorised means of service)							
II.	II. I served the person at (state the address, DX number, fax number etc.)							
III.	I necessarily made trips and travelled	kilometres for the p	purpose of effecting the service.					
SWORN before me at								
on th	ne day of 20							
Signa	ature(Person authorised to take Affidavi (e.g. Justice of the Peace)	ts)	SERVER					