**STATEMENT OF CLAIM**

[*SUPREME/DISTRICT/MAGISTRATES*] **Delete all but one** COURT OF SOUTH AUSTRALIA

CIVIL JURISDICTION

[*MINOR CIVIL*] **If applicable**

[*NAME OF LIST*] LIST **If applicable**

**Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number if more than one party of the same type.**

First Applicant

First Respondent

First Interested Party

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| Lodging Party |  | |
| **Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))** | |
| Name of law firm / solicitor  **If any** |  |  |
| **Law Firm** | **Solicitor** |

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| **Part 1**  **Introduction by Applicant**  **Summary of claim - Summarise the claim in one or two sentences**  **Legal basis of claim - List causes of action/statutory claims**  **Part 2**  **Background/uncontroversial matters**  **Facts expected to be agreed in separate numbered paragraphs**  1.  **Part 3**  **Other facts forming the basis of the claim**  **Other material facts that support the claim in addition to those in Part 2 in separate numbered paragraphs. Be very particular about each matter – e.g. when did it occur, where did it occur, what occurred.**  1.  **Part 4**  **Orders sought**  **Outline orders sought in separate numbered paragraphs**  1. |

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| **Certification**  **Mark appropriate section below with an ‘x’**  [ ] As the filing lawyer, I certify that this pleading is filed in accordance with the instructions of the party/parties for whom I act. There is a proper basis for each allegation of fact in the pleading and itcomplies with the Rules of Court.  [ ] As a Litigant in Person (self-represented), I am responsible for filing this pleading. Each allegation of fact in the pleading is true to the best of my knowledge, information and belief.  …………………………………….  Signature  …………………………………….  Name printed  …………………………………….  Date |