

Name of court

## Acknowledgment of service

(Part 8 claim)

Claim number

You should read the 'notes for defendant' attached to the claim form which will tell you how to complete this form, and when and where to send it.

Name of claimant (including any reference)

Name of defendant (including any reference)

**Tick and complete sections A – E as appropriate.**

**In all cases you must complete sections F and G**

### Section A

☐ I do **not** intend to contest this claim

Give details of any order, direction, etc. you are seeking from the court.

### Section B

☐ I intend to contest this claim

Give brief details of any different remedy you are seeking.

## Section C

☐ I intend to dispute the court's jurisdiction

(Please note, any application must be filed within 14 days of the date on which you file this acknowledgment of service)

## Section D

☐ I object to the claimant issuing under this procedure

My reasons for objecting are:

## Section E

☐ I intend to rely on written evidence

My written evidence:

☐ is filed with this form

☐ will be filed within 14 days

## Section F

Full name of defendant filing this acknowledgment

## Section G

### Statement of truth

I understand that proceedings for contempt of court may be brought against a person who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

- ☐ **I believe** that the facts stated in this section and any continuation sheets are true.
- ☐ **The defendant** believes that the facts stated in this section and any continuation sheets are true. **I am authorised** by the defendant to sign this statement.

### Signature

- ☐ Defendant
- ☐ Litigation friend  
(where judgment creditor is a child or a protected party)
- ☐ Defendant's legal representative (as defined by CPR 2.3(1))

### Date

Day              Month              Year

Full name

Name of legal representative's firm

If signing on behalf of firm or company give position or office held

Defendant's or defendant's legal representative's address to which documents should be sent.

Building and street

Second line of address

Town or city

County (optional)

Postcode

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If applicable

Phone number

DX number

Your reference

Email