



# Claim Form

In the High Court of Justice  
Queen's Bench Division  
Commercial Court  
Royal Courts of Justice

|            |                           |
|------------|---------------------------|
|            | <i>for court use only</i> |
| Claim No.  |                           |
| Issue date |                           |

Claimant(s)



Defendant(s)

Name and address of Defendant receiving this claim form

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|                   |  |
|-------------------|--|
| Amount claimed    |  |
| Court fee         |  |
| Solicitor's costs |  |
| Total amount      |  |

The court office at the Admiralty and Commercial Registry, Royal Courts of Justice, Strand, London WC2A 2LL is open between 10 am and 4.30 pm Monday to Friday. When corresponding with the court, please address forms or letters to the Court Manager and quote the claim number.

Claim No.

Brief details of claim

Particulars of claim (\*attached)(\*will follow if an acknowledgment of service is filed that indicates an intention to defend the claim)

Statement of Truth

\*(I believe)(The Claimant believes) that the facts stated in this claim form \*(and the particulars of the claim attached to this claim form) are true.

\* I am duly authorised by the claimant to sign this statement

Full name \_\_\_\_\_

Name of \*(claimant)(’s solicitor’s firm) \_\_\_\_\_

signed \_\_\_\_\_ position or office held \_\_\_\_\_

\*(Claimant)(’s solicitor) (if signing on behalf of firm, company or corporation)

*\*delete as appropriate*

Claimant’s or solicitor’s address to which documents or payments should be sent if different from overleaf including (if appropriate) details of DX, fax or e-mail.