

Defence (continued)

Claim No. **2. If you wish to make a claim against the claimant (a counterclaim)**

If your claim is for a specific sum of money, how much are you claiming?

£

I enclose the counterclaim fee of

£ My claim is for *(please specify)*

- To start your counterclaim, you will have to pay a fee. Court staff can tell you how much you have to pay.
- You may not be able to make a counterclaim where the claimant is the Crown (e.g. a Government Department). Ask at your local county court office for further information.

What are your reasons for making the counterclaim?

If you need to continue on a separate sheet put the claim number in the top right hand corner

3. Signed

(To be signed by you or by your solicitor or litigation friend)

*(I believe)(The defendant believes) that the facts stated in this form are true. *I am duly authorised by the defendant to sign this statement

delete as appropriate*Defendant's date of birth, if an individual**

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Give an address to which notices about this case can be sent to you

Postcode

Tel. no. **Position or office held**

(if signing on behalf of firm or company)

Date

if applicable

fax no.

DX no.

e-mail