

## Acknowledgement of service

Name of court	Case No.
Name of Applicant	
Name of Respondent	

**Please complete this form in black ink and tick the boxes that apply. Return the completed form to the court.**

1. Have you received the application and a copy of the supporting statement delivered with this form?

☐ Yes ☐ No

- 2a. On what date did you receive them?    /    /

- 2b. At what address did you receive them?

Address:
Postcode <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

3. Are you the person named as the Respondent in the application?

☐ Yes ☐ No

4. Do you intend to oppose the application?

☐ Yes ☐ No

If Yes, follow the instructions at paragraph 2 or 3 of the Notice of Proceedings.

Signed

(Respondent) (Solicitor for the Respondent)

Dated

   /    /    

Address for service of documents:

Postcode <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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