D	efence form	Name of court		Claim No.
(n	nortgaged residential premises)			
		Name of Claima	ant	
		Name of Defend	dant	
		Date of bearing		
		Date of hearing		
Pe	ersonal details			
1.	Please give your:			
	Title Mr Mrs Miss Ms Othe	r		
	First name(s) in full			
	Last name			
	Date of birth D D M M Y Y Y Y			
	Address (if different from the address on the claim t	form)		
	Postcode			
Di	sputing the claim			
2.	Do you agree with what is said about the pro the mortgage agreement in the particulars o		Yes	□No
	If No, set out your reasons below:			
3.	Do you agree that there are arrears of mortg repayments as stated in the particulars of cla		Yes	□No
	If No, state how much the arrears are:		£	None

4.	If the particulars of claim give any reasons for possession other than arrears of mortgage repayments, do you agree with what is said?	Yes	□No
	If No, give details below:		
	(Only answer question 5 if the loan secured by the mortgage (or part of it) is a regulated consumer credit agreement)		
5.	Do you want the court to consider whether or not the terms of your original loan agreement are fair?	Yes	□No
6.	Do you intend to apply to the court for an order changing the terms of your loan agreement (a time order)?	Yes	□No
Arr	ears		
7.	Have you paid any money to your mortgage lender since the claim was issued?	Yes	□No
	If Yes, state how much you have paid and when:	£	date
8.	Have you come to any agreement with your mortgage lender about repaying the arrears since the claim was issued?	Yes	□No
	I have agreed to pay <u>£</u> each (week)(month).		
9.	If you have not reached an agreement with your mortgage lender, do you want the court to consider allowing you to pay the arrears by instalments?	Yes	□No
10.	How much can you afford to pay in addition to the current instalments?	£	per (week)(month)

Ab	out yourself			
11.	State benefits Are you receiving Income Support?	Yes	□No	
12.	Have you applied for Income Support?	Yes	□No	
	If Yes, when did you apply?			
13.	Does the Department of Social Security pay your mortgage interest?	☐Yes	□No	
14.	Dependants (people you look after financially) Have you any dependant children?	☐Yes	□No	
	If Yes, give the number in each age group below:			
	under 11 11-15 16-17 18 and over			
15.	Other dependants Give details of any other dependants for whom you are financially responsible:			
16.	Other residents Give details of any other people living at the premises for whom you are not financially responsible:			
17.	Money you receive Usual take-home pay or income if self-employed including overtime, commission, bonuses	£	Weekly	Monthl:
	Job Seekers allowance	£		
	Pension	£		
	Child benefit	£		
	Other benefits and allowances	£		
	Others living in my home give me	£		
	I am paid maintenance for myself (or children) of	£		
	Other income	£		
	Total income	£		

18.	Do you have a cur	d savings rent bank or building	g society account?	Yes	□No
	If Yes, is it				
	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	it? If so, by how muc	h? £		
	overdra	awn? If so, by how m	uch? £		
19.	Do you have a sav	rings or deposit acco	ount?	Yes	□No
	If Yes, what is the	balance? £			
20.	Money you pay ou Do you have to pa	it ay any court orders o	r fines?	Yes	□No
	Court	Claim/Case number	Balance owing	Instalr pai	
				P	
			Total instalments	paid £	per month
21.	Give details if you payments or fines	are in arrears with a :	iny of the court		
22.	Do you have any l	oan or credit debts?		Yes	□No
	Loan/credit from	Balance owing	Instalments paid		
		Total instalments	s paid £ per month	_ n	

23. Give details if you are in arrears with any loan / credit repayments:

Regular expenses
(Do not include any payments made by other members of the household out of their own income)

24. What regular expenses do you have? (List below)

				Weekly	Monthly
	Council tax	£			
	Gas	£			
	Electricity	£			
	Water charges	£			
	TV rental & licence	£			
	Telephone	£			
	Credit repayments	£			
	Mail order	£			
	Housekeeping, food, school meals	£			
	Travelling expenses	£			
	Clothing	£			
	Maintenance payments	£			
	Other mortgages	£			
	Other	£			
	Total expenses	£			
25.	Priority debts This section is for arreadinclude regular expense Council tax arrears	es listed at Q	uestion 24	Weekly	Monthly
	Water charges arrears	£	-		
	Gas account	£	-		
	Electricity account	£	-		
	Maintenance arrears	£			
	Others (give details below)			
		£	-		
		£	-		
		f			

26.	If an order for possession were to be made, would you have somewhere else to live?	Yes	No
	If Yes, say when you would be able to move in:		

27. Give details of any events or circumstances which have led to your being in arrears with your mortgage (for example divorce, separation, redundancy, bereavement, illness, bankruptcy). If you believe you would suffer exceptional hardship by being ordered to leave the property immediately, say why.

Statement of Truth

 ☐ I believe that the facts stated in this defence form are true. ☐ The Defendant believes that the facts stated in this defendace are true. I am authorised by the defendant to sign this statement. Signature
are true. I am authorised by the defendant to sign this statement.
Signature
 Defendant Litigation friend (where defendant is a child or a patient) Defendant's legal representative (as defined by CPR 2.3(1))
Date
Day Month Year
Full name
Name of defendant's legal representative's firm
If signing on behalf of firm or company give position or office held

I understand that proceedings for contempt of court may be

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