



N1(CCFL)

# Claim Form

(CPR Part 7)

In the **High Court of Justice**  
**King's Bench Division**  
**Commercial Court**  
**Financial List**  
**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

	£
Amount claimed	
Court fee	
Legal representative's costs	
<b>Total amount</b>	

The court office at the Admiralty and Commercial Registry, The Rolls Building, 7 Rolls Building, Fetter Lane, London, EC4A 1NL 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 legal representative’s firm)\_\_\_\_\_

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

\*(Claimant)(’s legal representative)

(if signing on behalf of firm, company or corporation)

*\*delete as appropriate*

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