

Acknowledgment of Service

(Part 8 claim)

You should read the ‘notes for defendant’ attached to the claim form which will tell you when and where to send this form.

If you wish to contest the claim	If you wish to dispute the court’s jurisdiction	If you believe the claimant should not have used this procedure
complete section A	complete section B	complete section C

In the High Court of Justice Business and Property Courts of England and Wales King’s Bench Division Commercial Court	
Claim No.	
Claimant(s) <small>(including ref.)</small>	
Defendant(s)	
Defendant returning this form	

**delete as appropriate*

A

☐ ***(I intend)(The defendant intends) to contest this claim**

And (if applicable) ***(I)(the defendant) also seek(s) the following different remedy to that claimed by the claimant:**

B

☐ ***(I intend)(The defendant intends) to dispute jurisdiction**
(you should file your application within 28 days of the date on which you file this acknowledgment of service with the court)

C

☐ *(I object)(The defendant objects) to the claimant issuing under this procedure

***And** *(my)(the defendant's) reasons for objecting are:

D

Statement of truth

I understand that proceedings for contempt of court may be brought against a person who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

☐ **I believe** that the facts stated in this acknowledgment of service are true.

☐ **The defendant** believes that the facts stated this acknowledgment of service are true.
I am authorised by the defendant to sign this statement.

Signature

☐ Defendant

☐ Litigation friend (where the defendant is a child or protected party)

☐ 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

Defendant's or defendant's legal representative's address to which documents should be sent.

Building and street

Second line of address

Town or city

County (optional)

Postcode

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If applicable

Phone number

Fax phone number

DX number

Your Ref.

Email