



Name of court

Claim number

Name of claimant (including any reference)

Name of defendant (including any reference)

N9B

Defence and Counterclaim (specified amount)

Fill in this form if you wish to dispute all or part of the claim and/or make a claim against the claimant (counterclaim).

You have a limited number of days to complete and return this form to the court.

Before completing this form, please read the notes for guidance attached to the claim form.

Please ensure that all boxes at the top right of this form are completed. You can obtain the correct names and number from the claim form. The court cannot trace your case without this information.

How to fill in this form

- Complete Sections 1 and 2. Tick the correct boxes and give the other details asked for.
- Set out your defence in Section 3. If necessary, continue on a separate piece of paper making sure that the claim number is clearly shown on it. In your defence you must state which allegations in the particulars of claim you deny and your reasons for doing so. **If you fail to deny an allegation it may be taken that you admit it.**
- If you dispute the money claim entirely, you will need to provide evidence to show that you have already paid what you owe, or that you do not owe any of the claim amount.
- If you dispute part of the claim you must:
 - specify which part you admit and which you deny; and
 - give your own version of events if different from the claimant's.
- In either case, if the claimant disagrees with your explanation, you will need to attend a mediation appointment. This will be arranged by the Small Claims Mediation Service – part of HMCTS. The mediator will try to help you reach an agreement before the case goes to a hearing.
- If you wish to make a claim against the claimant (a counterclaim) complete Section 4.
- Complete and sign Section 5 before sending this form to the court. Keep a copy of the claim form and this form.

1. Disputing the claim

1.1 How much of the claim do you dispute?

I dispute the full amount claimed as shown on the claim form.

or

I admit the amount of

If you **dispute only part of the claim** you must either:

- pay the amount admitted to the person named at the address for payment on the claim form (see How to Pay in the notes on the back of, or attached to, the claim form).

Then send this defence to the court

or

- complete the admission form and this defence form and send them to the court

I paid the amount admitted on

Day		Month		Year			
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or

I enclose the completed form of admission.

Go to Section 2.

2. Claim already paid

2.1 Do you dispute this claim because you have already paid it?
Tick whichever applies

No. **Go to Section 3.**

Yes. I paid the claimant

£

on (before the claim form was issued)

Day		Month		Year			
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Give details of where and how you paid it in the box below.

Then go to Section 5.

3. Defence

- 3.1 Defence (If you need to continue on a separate sheet put the claim number in the top right hand corner.)

4. Counterclaim

- 4.1 If you wish to make a claim against the claimant (a counterclaim)
- 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, such as a Government Department. Ask at your local county court office for further information.
- 4.1 If your claim is for a specific sum of money, how much are you claiming?
- £
- 4.2 I enclose the counterclaim fee of
- £

4.3 My claim is for (please specify nature of claim)

4.4 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.

5. 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 section and any continuation sheets are true.

The defendant believes that the facts stated in this section and any continuation sheets are true. **I am authorised** by the defendant to sign this statement.

Signature

Defendant

Defendant's legal representative (as defined by CPR 2.3(1))

Date

Day		Month		Year			
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Claim number

Full name

Name of 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

| | | | | |

Claim number

If applicable

Phone number

DX number

Your reference

Email

Find out how HM Courts and Tribunals Service uses personal information you give them when you fill in a form:
<https://www.gov.uk/government/organisations/hm-courts-and-tribunals-service/about/personal-information-charter>