File Number

ACT CIVIL AND ADMINISTRATIVE TRIBUNAL



RESPONSE-CIVIL DISPUTE

NOTE: DO NOT SEND ANY MONEY WITH THIS RESPONSE

APPLICANT'S DETAILS		
Name		
Ivaille		
Address line 1		
Address Since O		
Address line 2		
	Fax:	
Telephone	Email:	
If a corporation:		
ACN/ABN		
Address of registered officer/public officer		
	ENTATIVE O DETAIL O (IE ANNO)	
Name	ENTATIVES DETAILS (IF ANY)	
Name		
Address line 1		
Address line 2		
	Fax:	
Telephone	Email:	
RESPONDENT'S DETAILS		
Name		
Address line 1		
Address line 2		
If a corporation:		
ACN/ABN		
Address of registered officer/public officer		
officer/public officer		
Talambana	Fax:	
Telephone	Email:	
RESPONDENT S KEPK	ESENTATIVES DETAILS (IF ANY)	
Name		
Address line 1		
Address line 2		
Telephone	Fax: Email:	
	Cilidii.	

Approved Form AF2009-194 approved by L Crebbin (General President), B Stefaniak (Appeal President) and P Spender (Presidential Member) on 7 October 2009 under section 117 of the *ACT Civil and Administrative Tribunal Act 2008*. This form repeals form AF2009-127

Admission of liability
I admit liability
□ in whole or
□ in part
and agree to the entry of judgment on the following terms:
Judgment is to be entered in the amount of: \$
The following amount is paid into the Tribunal Trust account: \$
The amount of the judgment is to be paid on or before
The amount of the judgment is to be paid by instalments on the following terms
The following orders are to be made:
If liability is not admitted
Disputed claim
I dispute the applicant's claim on the following grounds (please attach page if insufficient space):

If the respondent has a counterclaim or set-off
Counterclaim [and set-off]
The following counterclaim and set-off is made: \$
Set out briefly the grounds of the counterclaim and set-off
Date:
Signature of respondent or respondent's representative
Name of respondent or respondent's representative: