

File Number

ACT CIVIL AND ADMINISTRATIVE TRIBUNAL

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**RESIDENTIAL TENANCY
RESPONSE/SUBMISSIONS FORM**

APPLICANTS Name:

RESPONDENT'S/Lessor/Tenants DETAILS	
Name	
Address line 1	
Address line 2	
Telephone:	
Email:	
Fax:	
RESPONDENT'S REPRESENTATIVES DETAILS (IF ANY)	
Name	
Address line 1	
Address line 2	
Telephone	
Email	
Fax	

Statement contesting/defending application.

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 a fee is payable when filing the response.

Counterclaim [or 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: _____