

Response to Third Party Notice – Civil Dispute

ACAT file number

**XD**

**Applicant Respondent**

**Third Party**

# **THIRD PARTY**

**Name**

(if a company, include ACN/ARBN)

**Postal address**

 (if a company, address should be the registered office)

**Email**

 (preferred contact)

**Telephone**

# ACAT will use these details to communicate with you.

#  **THIRD PARTY’S AUTHORISED REPRESENTATIVE (IF ANY)**

A representative who is not a lawyer must also lodge a *Power of Attorney* (for an individual) or an *Authority to Act for a Corporation* (for any other legal entity).

**Name**

 **Postal address**

 (if a company, address should be the registered office)

**Email**

 (preferred contact)

**Telephone**

# If you have an authorised representative, ACAT will communicate with your representative.

# A copy of this response form will be provided to each applicant, respondent and third party. ACAT hearings are usually open to the public and information provided to ACAT may be publicly available. If you have concerns about your information being made public please contact the Registry.

# **RESPONSE**

**What is your response to the Third Party Notice?**

**□**

**□**

**□**

 **Admission of liability** - complete **SECTION A** **Disputed claim** - complete **SECTION B**

 **Counter claim** - complete **SECTION C**

[ ]  **SECTION A ADMISSION OF LIABILITY**

Complete Section A if you agree with the claim against you and admit liability.

**I admit liability**

[ ]  **in whole**; or

[ ]  **in part**

**and agree to the entry of judgment in the following terms:**

$

Judgment is to be entered in the amount of

*(date)*

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:

*(State amount, frequency and start date for proposed instalment payments)*

**ORDERS**

**I am seeking the following orders** (give details below or attach a separate page if needed)

[ ]  **SECTION B DISPUTED CLAIM**

Complete Section B if you dispute the claim against you.

**I dispute the respondent’s claim on the following grounds** (attach a separate page if needed).

[ ]  **SECTION C THIRD PARTY COUNTER CLAIM** (filing fee is payable for a counter claim)

Complete Section C if you want to make a claim against the respondent with respect to this matter.

**WHAT IS THE COUNTER CLAIM ABOUT?**

Set out a brief history of the dispute, including the reason/s for the claim

(attach a separate page if needed)

**ORDERS**

What order/s you want ACAT to make? Include the details of any amounts you want paid to you.

**The third party applies for the following orders (complete Part C1 and/or Part C2):**

**Part C1 MONETARY CLAIM**

1. **DETAILS OF AMOUNTS CLAIMED**
* **Amount claimed**
* **ACAT filing fee**

 (fee for commencing proceedings)

* **Search fees**

 (company and/or business name search)

* **Other amount claimed (if any)**

(specify amounts sought and reasons claimed)

1. **PARTICULARS OF INTEREST**

**Please indicate the preferred method of interest calculation:**

[ ]  **Interest to be determined by the Tribunal** in accordance with the *ACT Civil and Administrative Tribunal Procedures Rules 2020* and the *Court Procedures Rules 2006.*

 **Provide beginning date for interest calculation**

(if the respondent has made any payments to you during the period interest is claimed, attach a worksheet specifying dates and amounts paid, and outstanding balance from time to time)

**OR**

[ ]  **Contractual Interest is claimed.** Please attach:

* interest schedule used to calculate interest, including information on the period(s) for which interest is claimed; and
* contract or excerpt of contract that authorises contractual interest to be claimed.

**Total amount of interest accrued to date**

It is important to provide as much information as you can. The Statement of Interest Claimed Worksheet (available from [www.acat.act.gov.au](http://www.acat.act.gov.au/)) may be used and attached to your application if more space is required.

1. **TOTAL AMOUNT OF COUNTER CLAIM**

**Part C2 ANY OTHER ORDERS SOUGHT** (third party counter claim continued)

**I am claiming the delivery of goods; AND / OR**

**I am seeking other orders for the resolution of the dispute**

Give details below (attach a separate page if needed).

## **HEARING**

What dates are you **not** available to attend ACAT in the next 3 months?

**Do you need an interpreter?** [ ]  **No** [ ]  **Yes** (language and dialect)

**Do you need assistance?** (for example, a hearing loop when you attend ACAT)

A list of services ACAT can provide is available on the ‘Accessibility’ page of our website (www.acat.act.gov.au)

[ ]  **No** [ ]  **Yes (provide details)**

1. **SIGNATURE**

 **Signature of third party/ third party’s representative**

**Name of person**

 **signing**

 **Date**

Complete the attached checklist on the next page prior to lodgement with ACAT.

**CHECKLIST**

***Response to Third Party Notice – Civil Dispute* form** (available at [www.acat.act.gov.au](http://www.acat.act.gov.au)**) is correctly filled out** including:

**□**

* Third party name and full contact details, including email address
* ACAT file number is quoted. This can be found at the top left corner of the Third Party Notice – Civil Dispute and covering letter, starting with the letters “XD”
* If applicable, acceptance of liability is indicated and the orders agreed to are set out
* If applicable, grounds for disputing the claims made against you are set out
* Form is signed and dated by the third party or the third party’s authorised representative

**Response form is submitted to the ACAT before the** datespecified in the covering letter

If applicable ***Power of Attorney***(for an individual) or ***Authority to Act for a Corporation***(fora company or different legal entity) is attached (available at [www.acat.act.gov.au](http://www.acat.act.gov.au)).

**□**

**Documents to be relied on are attached.** Examples are:

**□**

* Correspondence between parties
* Receipts, invoices and/or quotes
* Particulars of financial loss
* Contract

**Correct number of copies of this form and attachments (at least 4) are provided**. An extra copy is needed for each additional applicant, respondent or third party.

**□**

**Correct lodgement fee is ready to be paid for any counter claim**. The ACAT accepts cash, bank cheque and credit card payments over the counter, and bank cheque or credit card payments via post.

**□**

**OR**

**Complete a *Request About Payment of Fees* form** if payment of fees will cause hardship and you wish to apply for a waiver or deferral of fees. Information on fees payable is available at [www.acat.act.gov.au](http://www.acat.act.gov.au/).

**□**

**NOTE:** Do *not* pay the amount claimed in the Third Party Notice – Civil Dispute to ACAT. The only payment that can be accepted with this form is a filing fee if applicable.

**Do you need assistance?**

If the third party, applicant or respondent need assistance (for example, an interpreter or hearing loop), please let ACAT know as soon as possible. A list of services ACAT can provide is available on the *Accessibility* page of our website ([www.acat.act.gov.au](https://www.acat.act.gov.au/)).

## **More information**

Visit our website [www.acat.act.gov.au](http://www.acat.act.gov.au) for information about:

* What to expect
* Case types: Civil disputes
* Fees and forms
* Lodge and serve documents

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# **Contact ACAT**

**Telephone** (02) 6207 1740

**Email** tribunal@act.gov.au

**Post** ACT Civil and Administrative Tribunal (ACAT)

 GPO BOX 370

 CANBERRA ACT 2601