

SUMMONS

COURT DETAILS

Court

#Division

#List

Registry

Case number

TITLE OF PROCEEDINGS

[First] plaintiff

[name]

#Second plaintiff #Number of
plaintiffs (if more than two)

[#name #number
Refer to Party Details at rear for full list of parties]

[First] defendant

[name]

#Second defendant #Number of
defendants (if more than two)

[#name #number
Refer to Party Details at rear for full list of parties]

#Additional information

[eg Estate of (name), Adoption of (child's name)]

FILING DETAILS

Filed for

[name] plaintiff[s]

Legal representative

[solicitor on record] [firm]

#Legal representative reference

[reference number]

Contact name and telephone

[name] [telephone]

HEARING DETAILS

This summons is listed at [time, date and place to be inserted by the registry].

TYPE OF CLAIM

[Select type of claim from the list available on the UCPR website at www.ucprforms.nsw.gov.au by clicking on the link to Publications at any NSW court registry.]

RELIEF CLAIMED

1 []

2 []

- A legal practitioner.
- LawAccess NSW on 1300 888 529 or at www.lawaccess.nsw.gov.au.

- The court registry for limited procedural information.

Court forms are available on the UCPR website at www.ucprforms.nsw.gov.au or at any NSW court registry.

REGISTRY ADDRESS

Street address

Postal address

Telephone

[on separate page]

#PARTY DETAILS

[Include only if more than two plaintiffs and/or more than two defendants.]

PARTIES TO THE PROCEEDINGS**Plaintiff[s]**

[name] [role of party eg first plaintiff]

[repeat as required for each additional plaintiff]

Defendant[s]

[name] [role of party eg first defendant]

[repeat as required for each additional defendant]

FURTHER DETAILS ABOUT PLAINTIFF[S]**[First] plaintiff**

Name

Address

[The filing party must give the party's address.]

#[unit/level number]

#[building name]

[street number]

[street name]

[street type]

[suburb/city]

[state/territory]

[postcode]

#[country (if not Australia)]

#Frequent user identifier

[include if the plaintiff is a registered frequent user]

[repeat the above information as required for the second and each additional plaintiff]

Legal representative for plaintiff[s]

Name

[name of solicitor on record]

Practising certificate number

Firm

[name of firm]

#Contact solicitor

[include name of contact solicitor if different to solicitor on record]

Address

#[unit/level number]

#[building name]

[street number]

[street name]

[street type]

[suburb/city]

[state/territory]

[postcode]

DX address

Telephone

Fax

Email

Electronic service address

[#email address for electronic service eg
service@emailaddress.com.au #Not applicable]

DETAILS ABOUT DEFENDANT[S]**[First] defendant**

Name

Address

#[unit/level number]

#[building name]

[street number]

[street name]

[street type]

[suburb/city]

[state/territory]

[postcode]

#[country (if not Australia)]

[repeat the above information as required for the second and each additional defendant]