

Disposal of Uncollected Goods Act 1970
s. 17(3)

FORM 7

Application under Part V for summary determination of dispute

Magistrates Court at:

No:

Between

| | | | | |
|---------------|-----------|--|--|----------|
| Applicant | Full name | | | |
| | Address | | | Postcode |
| | | | | |
| | Telephone | | | |
| Email address | | | | |

and

| | | | | |
|---------------|-----------|--|--|----------|
| Respondent | Full name | | | |
| | Address | | | Postcode |
| | | | | |
| | Telephone | | | |
| Email address | | | | |

Application

1. On *[date]*, at *[place]*
a dispute arose between the applicant and the respondent concerning goods in the possession of *[insert name of applicant or respondent, as case may be]* in the following circumstances *[give full details]*

2. The applicant applies for the summary determination of that dispute.

| | | | |
|----------------------------------|--|------|--|
| Signature of applicant or lawyer | | Date | |
|----------------------------------|--|------|--|

This application will be heard in the Magistrates Court at *[place]*
at *[time]* on *[date]*

| | |
|-----------|--|
| Registrar | |
|-----------|--|

| | |
|---------------------|----------------|
| To | The Respondent |
| and To ¹ | <i>[name]</i> |

If you do not attend either in person or by your counsel or solicitor at the time and place fixed above for the hearing of this application the Court may make orders in your absence.

¹ A copy of this application must be served on the respondent and any other person appearing to be affected by the application.

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and

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|---------------|-----------|--|----------|--|
| Respondent | Full name | | | |
| | Address | | | |
| | | | Postcode | |
| | Telephone | | | |
| Email address | | | | |

Application

1. On *[date]* , at *[place]*
a dispute arose between the applicant and the respondent concerning goods in the possession of *[insert name of applicant or respondent, as case may be]* in the following circumstances *[give full details]*.

2. The applicant applies for the summary determination of that dispute.

| | | | |
|----------------------------------|--|------|--|
| Signature of applicant or lawyer | | Date | |
|----------------------------------|--|------|--|

This application will be heard in the Magistrates Court at *[place]*
at *[time]* on *[date]*

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| Registrar | |
|-----------|--|

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|---------------------|----------------|
| To | The Respondent |
| and To ¹ | <i>[name]</i> |

If you do not attend either in person or by your counsel or solicitor at the time and place fixed above for the hearing of this application the Court may make orders in your absence.

¹ A copy of this application must be served on the respondent and any other person appearing to be affected by the application.

INFORMATION FOR APPLICANT

PLEASE READ THIS FORM THOROUGHLY

The following information is a guide only. Information on court procedures is available from any Magistrates Court Registry. Registry locations can be found under 'Court Locations & Contacts' on the Magistrates Court website

www.magistratescourt.wa.gov.au

| | |
|----------------------------------|---|
| APPLICANT | <ul style="list-style-type: none">• Your full name or the name of your company or business. |
| RESPONDENT | <ul style="list-style-type: none">• The full name or the name of the company or business you are issuing the claim against. |
| ADDRESSES | <ul style="list-style-type: none">• These are the addresses to which the court will send/serve documents and notices on you and the respondent.• The addresses provided on an application must contain a residential or business address for service.• To enable a party to serve documents by email or fax, an email address or fax number may be provided in addition to the above. |
| SIGNATURE | <ul style="list-style-type: none">• It is necessary for you to sign each copy of the application form within this package. |
| METHOD OF SERVICE | <ul style="list-style-type: none">• You may choose to have the claim served by a bailiff (fees will apply) or you may choose to serve the claim yourself. If you elect to serve the claim yourself you should obtain information from a registry of the Magistrates Court as to the methods to serve a claim. |
| CONTACT DETAILS | <ul style="list-style-type: none">• It is suggested that you include a contact telephone number, which will allow the respondent or the court to contact you if the need arises. |
| NON-APPEARANCE OF PARTIES | <ul style="list-style-type: none">• If you fail to appear at the time and place mentioned in the application, an order may be made in your absence. If the respondent fails to appear the matter may proceed in his or her absence. If both parties fail to appear then the action may be struck out. |

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| Applicant | Full name | | | |
| | Address | | | |
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and

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|---------------|-----------|--|----------|--|
| Respondent | Full name | | | |
| | Address | | | |
| | | | Postcode | |
| | Telephone | | | |
| Email address | | | | |

Application

1. On *[date]* , at *[place]*
a dispute arose between the applicant and the respondent concerning goods in the possession of *[insert name of applicant or respondent, as case may be]* in the following circumstances *[give full details]*

2. The applicant applies for the summary determination of that dispute.

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| Signature of applicant or lawyer | | Date | |
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This application will be heard in the Magistrates Court at *[place]*
at *[time]* on *[date]*

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| Registrar | |
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| To | The Respondent |
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| and To ¹ | <i>[name]</i> |
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