MAGISTRATES COURT of WESTERN AUSTRALIA (CIVIL JURISDICTION) FORM 23 – APPLICATION in a General Procedure Claim

Registry:				Case number:			
Claimant							
Defendant							
*delete as applicable To the Judicial Officer The *(Select the party making the application) makes application for the following order(s): NATURE OF ORDER SOUGHT:							
☐ Application be dealt with in the absence of the parties and service be dispensed with ☐ Conferral with other party(s) has occurred							
Applicant/ lawyer:			Date:				
Date:							
To: *(Select Pa	rty type) (enter addre	ss of party to be served)	To: *(Select Party Type) (enter address of party to be served)				
Select [✔] appropriate box							
Lodged by	☐ Claimant or Claimants Lawyer ☐ Other ☐ Defendant or Defendants Lawyer						
Address for service							
Contact details	Telephone:	Lawyer's ref:	Fax:	E mail:			

Information on making and responding to an application

- A supporting affidavit must be lodged with an application.
- A party which has been served with an application must, no later than 14 days from when the party was served with the application, lodge and serve
 - a) a response to the application stating whether the party consents or objects in relation to each order sought in the application; and
 - b) unless the party consents to every order sought in the application, an affidavit supporting the response: and
 - c) any related application by the party.

The response must be in the approved form.

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Applicant/ lawyer:			Date:				
Date:							
To: *(Select Party type) (enter address of party to be served) To: *(Select Party Type) (enter address of party to be served)							
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Part C – Defendant's service copy

MAGISTRATES COURT of WESTERN AUSTRALIA (CIVIL JURISDICTION) FORM 23 – APPLICATION in a General Procedure Claim

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Claimant							
Defendant							
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Applicant/ lawyer:			Date:				
Date:							
To: *(Select Party type) (enter address of party to be served) To: *(Select Party Type) (enter address of party to be served)							
Select [✔] appropriate box							
Lodged by	☐ Claimant or Claimants Lawyer ☐ Other ☐ Defendant or Defendants Lawyer						
Address for service							
Contact details	Telephone:	Lawyer's ref:	Fax:	E mail:			

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