

| |
|---------------------------|
| <i>For court use only</i> |
| Issue date |
| Claim No. |

IN THE HIGH COURT OF JUSTICE OF THE ISLE OF MAN

CIVIL DIVISION

Seal

| | |
|---|--|
| | PROCEDURE |
| Parties | |
| <div style="border: 1px solid black; height: 80px; width: 100%;"></div> | Claimant(s) (Full name(s) & address(es)) |
| <div style="border: 1px solid black; height: 80px; width: 100%;"></div> | Defendant(s) (Full name(s) & address(es)) |
| <div style="border: 1px solid black; height: 80px; width: 100%;"></div> | Additional Claimant(s) (Full name(s) & address(es)) |
| <div style="border: 1px solid black; height: 80px; width: 100%;"></div> | Additional Defendant(s) (Full name(s) & address(es)) |
| If there is more than one additional claimant please enter the full name of the additional claimant filing this form: | |

Brief details of claim
(use numbered paragraphs)

Value of claim

Name and address (including postcode)
of additional defendant(s) on whom copy
of the claim form is to be served

£

| | |
|------------------|--|
| Amount claimed | |
| Court fee | |
| Advocate's costs | |
| Total amount | |

Particulars of claim
(Use numbered paragraphs)

If you need to continue on a separate sheet please use the prescribed form – 'HCC CONTINUATION SHEET'

| | |
|---|--------------------------|
| <p>Statement of truth</p> <p>[I believe] [The additional claimant believes] that the facts stated in this claim form are true.</p> <p>[I am duly authorised by the additional claimant to sign this statement]</p> <p>Full name of [additional claimant]['s advocate]* *delete as appropriate</p> <p>Signed</p> <p>[Additional Claimant] ['s advocate] [Litigation friend] delete as appropriate</p> | |
| <p>Position or office held (if signed on behalf of a company or other corporation) (For 'Small Claims Procedure' only)</p> | |
| Date | |
| <p>Additional claimant's or additional claimant's advocate's address in the Isle of Man (including postcode) to which documents or payments should be sent:</p> | Telephone no. |
| | Fax no. (if appropriate) |
| | E-mail (if appropriate) |
| | Reference (if any) |