



# ACKNOWLEDGEMENT OF SERVICE OF CLAIM FORM

Form 3 [Rule 8.16(1)(a)]

IN THE SUPREME COURT OF JUDICATURE OF JAMAICA

CLAIM NO

**BETWEEN  
AND**

**CLAIMANT  
DEFENDANT**

**WARNING:** If this form is not fully completed and returned to the registry at the address below within FOURTEEN DAYS of service of the Claim Form on you, the Claimant will be entitled to apply to have the judgment entered against you. See Rules 9.2(5) and 9.3(1). If he does so you will have no right to be heard by the court except as to the costs or the method of paying any judgment unless you apply to set judgment aside.

1. Have you received the Claim Form with the above claim number? YES/NO
2. If so, when? \_/\_/\_
3. Did you also receive the Claimant's Particulars of Claim? YES/NO
4. If so, when? \_/\_/\_
5. Are your names properly stated on the Claim Form? YES/NO  
If not, what are your full names?  
.....
6. Do you intend to defend the claim? YES/NO  
If so you must file a Defence within 42 days of the service of this claim on you. See Rule 10.3(1)
7. Do you admit to the whole of the claim? YES/NO  
If you do you should consider to either:  
(a) pay the claim directly to the Claimant or his attorney-at-law, or

- (b) complete the application form to pay the claim by instalments.

If you pay the whole claim together with the costs and interest as shown on the Claim Form within 14 days, you will have no further liability for costs.

8. Do you admit any part of the claim? YES/NO

If you do you may -

- (a) pay the money that you admit directly to the Claimant or his attorney-at-law, or  
(b) complete the application form to pay him by instalments

9. If so how much do you admit?

If you dispute the balance of the claim you must also file a Defence within 42 days of service of the Claim Form on you or judgment may be entered against you for the whole amount claimed.

10. What is your own address?

11. What is your address for service?

If you are acting in person you must give an address to which documents may be sent either from other parties or from the court. You should also give your telephone number and fax number if any.

Dated                      day of                      20

Signed .....

[Defendant in Person]

[Defendant's Attorney-at-law]

**Filed by** (specify name and address of Attorney-at-Law or firm of Attorneys-at Law filing the Acknowledgement of Service).