

Response

(Divorce or other principal relief)

Fill in boxes A and C (see original application)	
A File number	
B Filed at (court use only)	
Filed on	
C Hearing date	/ /
Hearing time	

◆ Type or print clearly ◆ Cross boxes where applicable

1 Name of applicant (from application)	family name (surname)	given names
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Details of person making this response (respondent)

2 Name of respondent	family name (surname)	given names
3 Respondent's lawyer (if applicable)	- firm name - code - address - telephone	
4 Respondent's address for service of documents	tel () fax () DX and suburb/town postcode lawyer above <input type="checkbox"/> other <input type="checkbox"/> give details: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="text-align: right; margin-top: 5px;">postcode</div>	
5 Who prepared this response?	respondent <input type="checkbox"/> lawyer above <input type="checkbox"/>	

Orders sought

6 Do you want the Court to dismiss the application?	yes <input type="checkbox"/> no <input type="checkbox"/>
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Details of response

<p>7 Do you disagree with any statement in the application?</p>	<p>no <input type="checkbox"/> go to 8 yes <input type="checkbox"/> give details (refer to each disputed statement by the same number it has in the application):</p>
<p>8 Set out any other grounds on which you rely</p>	
<p>9 (<i>divorce only</i>) Do you say the arrangements for the children are proper?</p>	<p>no <input type="checkbox"/> yes <input type="checkbox"/></p>

Affidavit of respondent

I swear/affirm that:

- 1 I am the respondent;
- 2 I have read this response;
- 3 The facts of which I have personal knowledge are true;
- 4 All other facts are true to the best of my knowledge, information and belief.

Signature	Sworn/affirmed Place: _____ Date: ____ / ____ /20
Before me (signature of witness)	Full name of witness (please print)
Justice of the Peace <input type="checkbox"/>	Other authorised person <input type="checkbox"/> specify _____