CIVIL CLAIMS LIST

**DECLARATION OF SERVICE**

**The person who served the application and supporting documents must complete a**

**Declaration of Service for each respondent served.**

**The completed form(s) must be filled out, signed, witnessed by an authorised witness, scanned and emailed to VCAT.**

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| **Details of application** |
| In the Victorian Civil and Administrative Tribunal between: |
| Applicant/s |
| and |
| Respondent/s |
| Case number |

|  |  |
| --- | --- |
| **Details of service** |  |
| **I** |  |
| (full name of person serving document) | (occupation) |
| **of** |  |
| (address) |  |
| **declare that, on / /20 (date), I served a copy of:**   1. the Application filed at VCAT; 2. VCAT’s Orders; 3. Points of Claim and 4. Documents referred to in the Application and Points of Claim;   on the respondent,  **by –** | |
| (insert name of respondent) |  |
| **If the respondent is an individual (including an individual “trading as” a business):** | |
| **\***giving it personally to them at |  |
|  | (address) |
| **\***sending it by post to their usual or last known residential or business address |  |
|  | (address) |
| \*sending it by email to the email address which they have used to communicate with the applicant about the subject matter of the  proceeding |  |
|  | (address) |
| \*by leaving it for the respondent/s at their last known residential or business address with a person on the premises who is over 16 years of age and apparently residing or employed there | (name of person documents were given to) |
|  | (address) |

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| **If the respondent is a company (“Pty Ltd” or “Ltd”):** |
| \*delivering it personally to the Registered Address of the company |
| (address) |
| \*sending it by post to the Registered Address of the company |
| (address) |
| \*sending it by email to the email address which they have used to communicate with the applicant about the subject matter of the  proceeding |
| (address) |
| **If the respondent is an unincorporated association:** |
| \*giving it personally to the president, secretary or other similar office holder of the association |
| (name of person documents were given to) |
| (address) |
| \*sending it by post /email to the president, secretary or other similar office holder of the association at that person’s usual or last known residential or business address |
| (address) |

\*Delete if not applicable

**[If served by post] I further declare that the address at which I served the documents mentioned above is the address provided on the Application form.**

|  |  |
| --- | --- |
| Declared at | on |
| (place) | (date) |
| Signature |  |
| **[If served by email] I declare that if I have served the respondent by email, the parties have previously communicated by email about the subject matter of the proceeding using that email address and that the respondent’s email address is a current and valid email address.**  Declared at on    (place) (date)  Signature | |

(signature and details of authorised witness)

**The authorised witness must print or stamp his or her name, address and title pursuant to section 30(2) of *the Oaths and Affirmations Act 2018*. Examples of an authorised witness include Justice of the Peace, Pharmacist, Police Officer, Court Registrar, Bank Manager, Medical Practitioner and Dentist.**