Response to Letter of Claim



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The letter of claim requires a written response from you.

You are obliged under Civil Procedure Pre-action Protocol to respond to the letter of claim.

Answers to the questions in the statement of circumstance may further help the claimant understand your situation especially if you have had a change of circumstances or you are unable to pay.

Free independent debt advice is available from:

Citizens Advice	visit http://www.citizensadvice.org.uk or look in your local yellow pages for your local office
Consumer Credit	visit http://www.cccs.co.uk or
Counselling Service	call 0800 138 1111 (Monday to Friday 8am – 8pm)
National Debtline	call 0808 808 4000 (Monday to Friday 9am – 9pm and Saturday 9.30am – 1pm)
The Money Advice Service	visit http://www.moneyadviceservice.org.uk or call 0300 500 5000 (Monday to Friday 8am – 6pm)

1.0 your response to the letter of claim

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Your full name(s)
1.1
                                                                                                             go to 1.2
        To what degree do you accept or reject the claim against you?
1.2
        I accept the claim in full
                                                  go to 1.3
                                                                   Issued counter claim
                                                                                                             go to 2.0
                                                                   Paid prior
        I accept the claim in part
                                                  go to 1.3
                                                                                                             go to 2.0
        I reject the claim
                                                  go to 1.5
       How would you summarise your personal circumstances that have contributed to the claim against you?
1.3
        Loss of employment
                                                                   Maternity leave
                                                  go to 1.4
                                                                                                             go to 1.4
        Serious illness
                                                                   Disability
                                                  go to 1.4
                                                                                                             go to 1.4
        Death of a partner
                                                                   Imprisonment
                                                  go to 1.4
                                                                                                             go to 1.4
                                                                   Over borrowing
        Relationship breakdown
                                                  go to 1.4
                                                                                                             go to 1.4
        Starting a lower paid job
                                                                   Other
                                                  go to 1.4
                                                                                                             go to 1.4
        Starting full-time education
                                                  go to 1.4
        Please use this space to describe or support your personal circumstances.
1.4
                                                                                                            go to 1.6
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1.0 your response to the letter of claim

1	5

1.5	Please give the reasons you reject the support of your dismissal of the claim a	claim, include sufficient i gainst you.	indication of any facts on which you are	likely to rely on in
				go to 1.6
1.6	Do you require more information about	the claim?		go to 1.6
1.6	Do you require more information about Yes, I need more	the claim? go to 1.7	No, I do not need any more	go to 1.6
1.6 1.7		go to 1.7		go to 1.8
	Yes, I need more Please specify what information is requ	go to 1.7		go to 1.8
	Yes, I need more Please specify what information is requ	go to 1.7		go to 1.8
	Yes, I need more Please specify what information is requ	go to 1.7		go to 1.8
	Yes, I need more Please specify what information is requ	go to 1.7		go to 1.8
	Yes, I need more Please specify what information is requ	go to 1.7		go to 1.8
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	Yes, I need more Please specify what information is requ	go to 1.7		go to 1.8
	Yes, I need more Please specify what information is requ	go to 1.7		go to 1.8

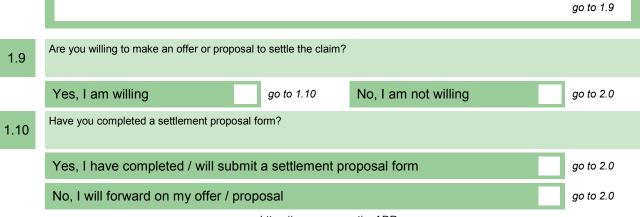
https://secure.pre-actionADR.org

go to 1.8

1.0 your response to the letter of claim

1.8

Please use this space to express your willingness to reach agreement, and explain your proposal to resolve the claim against you.



2.0 additional information

2.1

Use this space to detail any information you think relevant or to be noted by the claimant.

declaration of intent and accuracy

Declaration of intent and accuracy. Please sign and print your name here to indicate that the information contained in this document is accurate and representative of your position and current situation.

Name:

Signature:

Dated:

