MAGISTRATES' COURT GENERAL CIVIL PROCEDURE RULES 2020

Rule 6.17 **FORM 6A**

**AFFIDAVIT/DECLARATION OF SERVICE OF COMPLAINT**

|  |  |  |
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| IN THE MAGISTRATES’ COURT | Court Reference: |       |
| OF VICTORIA |
| AT |       |  |
| **INDUSTRIAL DIVISION**  |  |
|  |
| BETWEEN |       |  |
| Plaintiff |
|  |
| OF |       |
|  |
| and |       |  |
| Defendant |
|  |
| OF |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Date of document: |       |  |  |
| Filed on behalf of: |       |  |  |
| Australian lawyer name: |       | Code: |       |
| Address: |       | Telephone: |       |
| Reference: |       |

|  |  |  |  |
| --- | --- | --- | --- |
| I |       |  |       |
|  | *(full name of the person serving document)* |  | *(occupation)* |
| of |       |
|  | *(address)* |
| \*make oath and say |
| \*affirm and say |
| \*declare that |
| I served \*an original/\*a copy of the complaint together with two notices of defence |
|  |
| on |       |
|  | *(name of the person served with document)* |

*(State all relevant information and facts as required by Rule 6.17(1) in numbered paragraphs which may include answers to the following:*

* *How did you identify the person you served and establish the person’s identity?*
* *Was the person you served the person named in the document/s to be served?*
* *At what time, day of the week and date did you serve the document/s on the person?*
* *Where was the person served the document/s? For example, was it at the residence or the business of the person?*
* *How was/were the document/s served on the person? For example, by hand or by post?)*

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|       |

|  |
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| \*[*for affidavits*] The contents of this affidavit are true and correct and I make it knowing that a person making a false affidavit may be prosecuted for the offence of perjury.  |
|  |
| \*[*for statutory declarations*] I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.  |
|  |
| \*Sworn/Affirmed/Declared at *(place)* |  |  |
|       |  |  |
|  |
| in the State of Victoria on *(date)* |  |  |
|       |  |  |
|  |
|  |       |
| *(Signature of person making affidavit)* |
|  |
| Before |  |  |
|  | *(Signature)* |
|  |
|  |       |
|  | *(Name and address in legible writing, typing or stamp)* |
|  |  |
| \*authorised under section 30(2) of the **Oaths and Affirmations Act 2018** to witness the signing of a statutory declaration.  |
| \*authorised under section 19(1) of the **Oaths and Affirmations Act 2018** to take an affidavit.  |