## Defence to admiralty limitation claim

Que	Queen's Bench Division Admiralty Court	
Claim No.		

Claimant(s)

Defendant(s)

You have a limited number of days to file and serve this form. See notes for guidance attached to the claim form.

Signed
--------

(To be signed by you or by your solicitor)

\*(I believe)(The defendant believes) that the facts stated in this form are true. \*I am duly authorised by the defendant to sign this statement Position or office held (if signing on behalf of firm or company)

Date

Give an address to which notices about this case can be sent to you \*delete as appropriate

Postcode

Tel. no.

if applicable		
fax no.		
DX no.		
e-mail		