A REAL STATE	In the		Note that all Designated Money Claims will be issued in the
	Fee Account no.		Northampton County Court.
Claim Form	Help with Fees - Ref no. (if applicable)		
	For	court use only	
You may be able to issue your claim online which may	Claim no.		
save time and money. Go to www.moneyclaim.gov.uk to find out more.	Issue date		
Claimant(s) name(s) and address(es) including postcode	SEAL		Note: see PD 16.2.3: Where the defendant is an individual, the claimant should (if he is able to do so) include in the claim form an address at which the defendant resides or carries on business. This paragraph applies even though the defendant's
Defendant(s) name and address(es) including postcode			solicitors have agreed to accept service on the defendant's behalf.
A Brief details of claim			
			This part of the N1 is 'administrative' and only very brief details - of the claim should be stated – for example: sufficient to enable the court to be aware of it being an action in contract or tort.
Value			with the 'track' the claim will be allocated to.
You must indicate your preferred County Court Hearing	Centre for hearings here (see n	notes for guidance)	Note: If the action is likely to be a defended action, and the
			defendant is not an individual, the claim is likely to be referred
Defendant's		£	to our preferred court. Where the
name and address for	Amount claimed	L	defendant is an individual it is likely to be referred to the
service including	Court fee		defendant's home court.
postcode			
	Legal representative's costs		
	Total amount		
For further details of the courts unusu govern/(find, court, tribunal			

For further details of the courts www.gov.uk/find-court-tribunal. When corresponding with the Court, please address forms or letters to the Manager and always quote the claim number.

N1 Claim form (CPR Part 7) (10.20)

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			_	
		Claim No.		
Does, or will, your clain Particulars of Claim (at	n include any issues under the Human Rights /	Act 1998? 🗌 Yes 📄 No 👞	specific Huma	t out in
			to fully draft the claim it may be N1. In all othe	s room on the form he particulars of e endorsed on the r circumstances a fted Particulars of prepared.

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of claim	ant's lega	al represer	ntative's firm	n			
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	of claim	of claimant's lega	of claimant's legal represer	of claimant's legal representative's firm	of claimant's legal representative's firm	of claimant's legal representative's firm	of claimant's legal representative's firm

Claimant's or claimant's legal represe documents should be sent.	entative's address to which	
Building and street		_
Second line of address		-
Town or city		
County (optional)		
Denterral		
Postcode		
If applicable		
Phone number		
Fax phone number		
DX number		_
Your Ref.		
Email		٦