

Admission (specified amount)

- You have a limited number of days to complete and return this form
- Before completing this form, please read the notes for guidance attached to the claim form

When to fill in this form

- You are admitting all of the claim **and** you are asking for time to pay; **or**
- You are admitting part of the claim. (You should also complete form N9B).

How to fill in this form

Individual

- Tick the correct boxes and give as much information as you can. Then sign and date the form. If necessary provide details on a separate sheet add the claim number and attach it to this form.
- Make your offer of payment in box 11 on the back of this form. If you make no offer the claimant will decide how much and when you should pay.

Organisation

- If you are not an individual, you should ensure you attach a financial statement showing your companies profit, loss, assets and liabilities to support any offer of payment made in box 11. Ensure you tick the correct box and complete sections 1, 9 (if applicable) and 12. If you are a Limited Company, the claimant is under no obligation to accept your offer.
- You can get help to complete this form at any County Court or Citizen Advice Bureau.

Where to send this form

- If you admit the claim in full**
Send the completed form to the **claimants address** shown on the claim form as one to which documents should be sent.
- If you admit only part of the claim**
Send the form **to the issuing court** at the address given on the claim form, together with the defence form (N9B).

How much of the claim do you admit?

- I admit the full amount claimed as shown on the claim form **or**
- I admit the amount of £

1 Personal/Organisation details

Surname/
Organisation

EFLORIST LTD

Forename

Mr Mrs Miss Ms

Married Single Other (specify)

Date of birth

Address

eFlorist LTD
Unit 35, ROMSEY INDUSTRIAL
ESTATE, GREATBRIDGE
ROAD, ROMSEY, HANTS SO510HR

Phone no.

Name of court LEEDS COMBINED COURT CENTRE, LEEDS COUNTY COURT	
Claim No.	B53YP270
Claimant (including ref.)	DOUG PAULLEY
Defendant	EFLORIST LTD

2 Dependants (people you look after financially)

Number of children in each age group

under 11 11-15 16-17 18 & over

Other dependants

(give details)

3 Employment

I am employed as a

My employer is

Jobs other than main job (give details)

I am self employed as a

Annual turnover is £

I am not in arrears with my national insurance contributions, income tax and VAT

I am in arrears and I owe £

Give details of:

(a) contracts and other work in hand

(b) any sums due for work done

I have been unemployed for

years months

I am a pensioner

4 Bank account and savings

I have a bank account

The account is in credit by £

The account is overdrawn by £

I have a savings or building society account

The amount in the account is £

5 Residence

I live in my own house

lodgings

my jointly owned house

council accommodation

rented accommodation

6 Income

My usual take home pay (including overtime, commission, bonuses etc.)	£	per
Income support	£	per
Child benefit(s)	£	per
Other state benefit(s)	£	per
My pension(s)	£	per
Others living in my home give me	£	per
Other income (give details below)		
	£	per
	£	per
	£	per
Total income	£	per

7 Expenses

(Do not include any payments made by other members of the household out of their own income)

I have regular expenses as follows:

Mortgage (including second mortgage)	£	per
Rent	£	per
Council tax	£	per
Gas	£	per
Electricity	£	per
Water charges	£	per
TV rental and licence	£	per
HP repayments	£	per
Mail order	£	per
Housekeeping, food, school meals	£	per
Travelling expenses	£	per
Children's clothing	£	per
Maintenance payments	£	per
Others (not court orders or credit debts listed in boxes 9 and 10)		
	£	per
	£	per
	£	per
Total expenses	£	per

8 Priority debts

(This section is for arrears only. Do not include regular expenses listed in box 7.)

Rent arrears	£	per
Mortgage arrears	£	per
Council tax/Community Charge arrears	£	per
Water charges arrears	£	per
Fuel debts: Gas	£	per
Electricity	£	per
Other	£	per
Maintenance arrears	£	per
Others (give details below)		
	£	per
	£	per
Total priority debts	£	per

9 Court orders

Court	Claim No.	£	per
		£	per
		£	per
		£	per
Total court order instalments		£	per

Of the payments above, I am behind with payments to (please list)

N/A

10 Credit debts

Loans and credit card debts (please list)

	£	per
	£	per
	£	per

Of the payments above, I am behind with payments to (please list)

11 Offer of payment

- I can pay the amount admitted on
- or
- I can pay by monthly instalments of £

If you cannot pay immediately, please give brief reasons below

12 Declaration

I declare that the details I have given above are true to the best of my knowledge

Signed

Date

Position or office held
(if signing on behalf of firm or company)

CUSTOMER SERVICE
ASSISTANT MANAGER