**Form 6: Third party notice**

**CERVICALCHECK TRIBUNAL**

**THIRD PARTY NOTICE**

**Claim record no.:**

**[1st]\* Claimant**

Full name: ……………………………………………………………………………………..

Claimant’s Solicitor: ………………………………………………………………….……… (Name of firm and name of solicitor responsible for claim)

*\* Where there is more than one claimant, the name of each further claimant (numbered 2nd Claimant, 3rd Claimant etc.) should be set out in the same manner immediately following the name of the 1st claimant.*

**[1st]\* Respondent**

Full name: ……………………………………………………………………………………..

Respondent’s Solicitor: ………………………………………………………………….…... (Name of firm and name of solicitor responsible for claim)

*\* Where there is more than one respondent, the name of each further respondent (numbered 2nd Respondent, 3rd Respondent etc.) should be set out in the same manner immediately following the name of the 1st respondent.*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ISSUED** pursuant to Order of the CervicalCheck Tribunal dated …..…of ………20…. (a copy of which is attached)

To: ……………..of ……………………………………………………..

**TAKE NOTICE** that these Tribunal proceedings have been brought by the Claimant against the Respondent in which the Respondent claims [*set out brief particulars of claim*] particulars of which are contained in the certified Claim Form a copy of which is delivered herewith.

The Respondent claims against you to be indemnified against the Claimant’s claim and the costs of these Tribunal proceedings or that you make a Contribution to such extent as the Tribunal shall deem fit on the grounds that the injury, loss and damage complained of by the Claimant was solely caused or contributed to by reason of alleged negligence and breach of statutory duty and breach of contract on the part of the Third Party, which led to the injury which the Claimant claims caused her personal injuries, loss and other damage.

[*Set out any further particulars of the respondent’s claim for contribution or indemnity*]

**AND TAKE NOTICE** that in accordance with section 15 of the CervicalCheck Tribunal Act 2019, the claim will proceed before the Tribunal where you the third party consent to having all issues arising in the claim determined by the Tribunal, and if you do not consent to having all issues arising in the claim so determined by the Tribunal, the Tribunal shall not continue to hear and determine the claim (but proceedings on the claim may be brought or continued in the High Court).

**AND TAKE NOTICE** that if you consent to having all issues arising in the claim determined by the Tribunal, and wish to dispute the Claimant’s claim against the Respondent, or the Respondent’s claim against you, you are required within 21 days after service of this notice upon you to lodge in the Tribunal Office and deliver to all parties a Consent and Third Party Response in Form 5 in the Schedule to the Rules of the Procedure of the Tribunal and if you do not so consent, you are required within 21 days after service of this notice upon you to lodge in the Tribunal Office and deliver to all parties notice to that effect in Form 5.

You are hereby requested to consent to having all issues arising in the claim determined by the Tribunal.

**AND TAKE NOTICE** that the Tribunal has given the following directions under the said Order dated ……of ………...20….: [*specify directions*]

If you wish to apply to the Tribunal to vary any of the said directions you may do so before the expiration of the time limited for delivery of your Third Party Response and having lodged in the Tribunal Office a written consent to having all issues arising in the claim determined by the Tribunal.

Dated …………of…………..20….

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*(Solicitor for) Respondent

To: ………………….., third party, of …………..

And: Registrar

 CervicalCheck Tribunal at…………………….

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