



**LIST OF WITNESSES**

Claim No. : [ ] [ ]  
Counterclaim No. : [ ] [ ]  
Please tick (√) :  By Claimant  By Respondent

S/No.	Name(s) of Witness(es)	Language to be Used When Giving Evidence
[ ]	[ ]	[ ]
[ ]	[ ]	[ ]
[ ]	[ ]	[ ]
[ ]	[ ]	[ ]
[ ]	[ ]	[ ]
[ ]	[ ]	[ ]

**NOTE:** Where witnesses need to be summoned by you, please collect the application “Summons – To Witness” form from the Registry. Upon the application being approved, an appointment will be fixed for you to accompany the court process server to carry out personal services of the summons with a provision by you of taxi or car transport.

\_\_\_\_\_  
**Signature of Claimant(s)\*/Respondent(s)\***

Name : [ ]  
Designation : [ ] (If Company)  
Date : [ ]

*\*delete whichever is appropriate*

**NOTE: ORIGINAL COPY TO BE TENDERED SEPARATELY**