

How to fill up FORM 1 (STATEMENT OF CLAIM)

Shown below is how Form 1 is to be filled up for purpose defence and counter-claim and can be used at all the Tribunal for Consumer Claims branches (TTPM).

Explanation is also given for terms you may Not understand.

CLAIMANT
 - You are the claimant (individual making a claim).
 - You are required to fill your name and address in full.

RESPONDENT
 - Party against whom a claim is made.
 - State the full name and address.

AMOUNT CLAIMED
 - State the exact amount claimed.
 - The amount claimed should not exceed RM25,000.00

PARTICULARS OF CLAIM
 - State the relevant date and how the claim had arisen or the basis of the claim.

1. Date
2. I bought things/services
3. and pain (RM)
4. I am disappointed because :-
 - i. _____
 - ii. _____
 - iii. _____
5. Other (If any) _____

OFFICE USE
 - The section is use for the Tribunal use.

CONSUMER PROTECTION ACT 1999

CONSUMER PROTECTION (THE TRIBUNAL FOR CONSUMER CLAIMS) REGULATIONS 1999

SECOND SCHEDULE

FORMS
(Regulation 4)

FORM 1
(Regulation 5)

STATEMENT OF CLAIM

IN THE TRIBUNAL FOR CONSUMER CLAIMS
 AT

IN THE STATE, MALAYSIA
 CLAIM NO. :

Name of Claimant :
 I/C No. :
 Address :
 Tel. No. (H) :
 H/P No. :
 Fax No. :
 Email :

Name of Respondent :
 I/C No. / Registration Company No. :
 Address :
 Tel. No. :
 H/P No. :
 Fax No. :
 Email :

Statement :

Claimant's claim is or a sum of

Particulars of claim :

.....
Date

.....
Signature/Right
Thumbprint of Claimant

.....
Date of Filing

.....
Secretary

(SEAL)