### LIST OF DOCUMENTS

### **COURT DETAILS**

Court

#Division

#List

Registry

Case number

#### TITLE OF PROCEEDINGS

[First] plaintiff [name]

#Second plaintiff #Number of plaintiffs (if more than two)

[First] defendant [name]

#Second defendant #Number of defendants (if more than two)

#### PREPARATION DETAILS

Prepared for **[name]** [role of party eg plaintiff]

#Legal representative [solicitor on record] [firm]

#Legal representative reference [reference number]

Contact name and telephone [name] [telephone]

Contact email [email address]

### ORDER FOR DISCOVERY

Made on [date]

### **#SOLICITOR'S CERTIFICATE**

I certify that:

- #I have advised the [role of party] as to the obligations arising under an order for discovery.
  - #I have advised the following [#officers #employees #officers and employees] of [name of party], the [role of party], as to the obligations arising under an order for discovery:
  - (a) [list the officers and/or employees].
- I am not aware of any documents within any of the classes specified in the order (other than excluded documents) that are, or that within the last 6 months before the

commencement of the proceedings have been, in the possession of the party ordered to produce the list of documents (other than those referred to in Part 1 or 2 of the list of documents).

Signature

Capacity [eg solicitor on record, contact solicitor]

Date of signature

## **#SIGNATURE OF OR ON BEHALF OF PARTY IF NOT LEGALLY REPRESENTED**

Signature

Capacity [eg authorised officer, role of party]

Date of signature

#### [on separate page]

### **AFFIDAVIT**

Name

Address

Occupation

Date

I [#say on oath/#affirm]:

- #I am the [role of party].#I am [give details of the capacity of the person making the affidavit and the facts that qualify the person to make the affidavit].
- I have made reasonable enquiries as to the existence and location of the documents referred to in the order.
- I believe that there are no documents (other than excluded documents) falling within any of the classes specified in the order that are, or that within the last 6 months before the commencement of the proceedings have been, in [#my possession (if deponent is the party) #the possession of the party ordered to produce the list of documents], other than the documents referred to in Part 1 or 2 of the list of documents.
- I believe that the documents in Part 1 of the list are in [#my possession (if deponent is the party) #the possession of the party ordered to produce the list of documents].
- 5 #I believe that the documents in Part 2 of the list are within the possession of the persons respectively specified in that part.
- #As to documents in Part 2 of the list in respect of which no person is specified, I do not know who possesses these documents.
- As to the documents in the list that are claimed to be privileged documents, the facts relied on as establishing the existence of the privilege are as follows:

  [state facts].

#SWC	RN #AFFIRMED at				
Signat	ture of deponent				
Name	of witness				
Addres	ss of witness				
Capacity of witness		[#Justice of the peace #Solicitor #Barrister #Commissioner for affidavits #Notary public]			
And as	a witness, I certify the following m	natters concerning the person who made this affidavit (the <b>deponent)</b> :			
1	#I saw the face of the deponent	. [OR, delete whichever option is inapplicable]			
		ponent because the deponent was wearing a face covering, but I am a special justification for not removing the covering.*			
2	#I have known the deponent for at least 12 months. [OR, delete whichever option is inapplicable]				
	#I have confirmed the deponent	's identity using the following identification document:			
		Identification document relied on (may be original or certified copy) †			
Signat	ture of witness				
Note: T	he deponent and witness must s	ign each page of the affidavit. See UCPR 35.7B.			

[\* The only "special justification" for not removing a face covering is a legitimate medical reason (at April 2012).]

[†"Identification documents" include current driver licence, proof of age card, Medicare card, credit card, Centrelink pension card, Veterans Affairs entitlement card, student identity card, citizenship certificate, birth certificate, passport or see Oaths Regulation 2011.]

Note: The deponent and witness must sign each page of the affidavit. See UCPR 35.7B

### [on separate page]

# PART 1

# **Documents in possession of [role of party]**

Item no.	Nature of document/s	Number of documents in group (if applicable)	Date/period
1			

# Documents where privilege is claimed

Item no.	Nature of document/s	Number of documents in group (if applicable)	Date/period	Circumstances under which privilege is claimed
1				

# PART 2

## **Documents in possession of other persons**

Item no.	Nature of document/s	Number of documents in group (if applicable)	Date/period	Name of the person who the deponent believes has possession
1				