Family Justice Courts Practice Directions 2024 Appendix A – Volume 2

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P.4, r.2 FJ(G)R 2024 Para 23A PD 2024

Offer of Amicable Resolution

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

[ID No.]

[ID No.]

Originating Application

No. FC/OA [number]/[year]

Sub Case No. [number]/[year]¹

[Applicant's name] ... Applicant(s)

Between

And [Respondent's name]

... Respondent(s)

OFFER OF AMICABLE RESOLUTION

Information concerning Alternative Dispute Resolution ("ADR") is provided in Annex A of this Form. In addition, this form contains footnotes to help you in the completion of the form. Please note that information in Annex A and Notes are NOT to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

1. I am the [Enter party type here] in [Enter case number here].

I wish to make an Offer of amicable resolution.²

¹ To insert sub-case details if relevant.

² You can make an Offer to settle to the other party by completing this Form.

2. Terms of my Offer:³

Enter terms of offer here.

- 3. This Offer is made on [Enter date here].
- 4. This Offer is open for acceptance until⁴
 - Enter date here.
 - \Box the offer is withdrawn in writing.

5. This Offer can be accepted or rejected in writing to my:⁵

- email address: Enter email address here.
- mobile number:
 Enter mobile number here.
- □ correspondence address: Enter address here.

Signature

Enter full name as per NRIC/Passport here.

Enter date here.

This Offer is served on the [Enter name of party / party type here]

- on:⁶ Enter date here.
- \Box by post to
 - Enter address here.
- \Box by email to

³ If the other party does not accept the Offer, this Offer will not be disclosed to the hearing judge until after the decision. In other words, if the Offer is not accepted, you may take a different position from your Offer during the Court hearing. The hearing judge can consider your Offer when deciding the issue of legal costs at the conclusion of the hearing.

⁴ Your Offer must remain open for at least 7 days.

⁵ To respond to this Offer in writing, please complete the Response to Offer of Amicable Resolution (Form 51).

⁶ As far as possible, you should use the other party's contact details in Court records.

Enter email address here.
by text message to Enter mobile number here.

Annex A

1. What are my Alternative Dispute Resolution (ADR) options?

The Family Justice Courts (FJC) adopts a variety of dispute resolution processes to assist families undergoing legal proceedings at FJC. The Family Dispute Resolution Division (FDR) of FJC oversees the provision of Court ADR modalities such as mediation and neutral evaluation.

Most litigants are concerned about issues such as legal costs, the duration of the litigation process, confidentiality and whether they have control over the outcome of the case. Some other concerns may include the desire to preserve the relationship with the other party, or discomfort over participating in a hearing. Such litigants should consider Court ADR options to seek holistic resolution of their issues before proceeding for adjudication of their case.

2. What is Mediation at FJC?

Mediation is a process in which a neutral third party (the Mediator) helps parties to communicate openly with each other in a respectful and safe environment and explore mutually acceptable and sustainable solutions for themselves and their loved ones. The focus is not on who is at fault for the dispute. Instead, the Mediator will help parties discuss and address the issues holistically and work together to find solutions that meet the parties' concerns.

Mediators at FJC are specially appointed Judge-Mediators, staff Specialist Family Mediators, and volunteer legal professionals trained in family mediation. Sometimes, if there are complex or deep-seated emotional issues, a co-mediation may be conducted by a Mediator and a Court Family Specialist (CFS). The CFS has expertise in child welfare and family related matters.

It is mandatory for parents undergoing divorce proceedings in Singapore, with at least one child aged 21 and below, to attend mediation at FDR. For all other cases, parties may voluntarily request for mediation or other ADR process. The Court may also direct parties to attend mediation or other ADR process where the Court is of the view it would be beneficial for parties to try to resolve their dispute amicably.

All proposals disclosed during mediation by parties/lawyers are without prejudice. This means if parties do not have an agreement at mediation and instead proceed for hearing, the hearing judge will not be informed of the proposals made by parties. The Mediator will not be the judge at the hearing.

Mediation has been successful in allowing parties to come to a resolution of their divorce proceedings without the need for adjudication. Approximately 70% of these cases mediated in Court have been fully settled. Up to 20% of cases are at least partially settled after mediation.

For suitable cases, instead of FDR conducting the mediation, the Court may direct parties to attend private mediation instead, for example:

- Divorce applications where the value of the assets is \$2 million or above, and there are no contested child issues (such as disputes relating to the living and care arrangements of, or the custody, care and control of or access to any child).
- Applications for probate and letters of administration where the value of the assets is \$2 million or above.
- Applications under the International Child Abduction Act 2010.

Private mediation may be conducted at the Singapore Mediation Centre (SMC), the Law Society Mediation Scheme (LSMS) or by an agreed private mediator chosen by the parties.

For more detailed information on mediation at FJC, please refer to the Mediation Handbook available at <u>www.judiciary.gov.sg/docs/default-source/family-docs/mediation-handbook.pdf</u>.

3. What is Neutral Evaluation at FJC?

Neutral Evaluation is an ADR process where parties seek an early, objective assessment of their case from a neutral third party with subject matter expertise (the Evaluator). The assessment by the Evaluator is based on evidence and law.

For neutral evaluations conducted at FJC, the Evaluators are serving or retired Judges with family law experience and expertise. During the neutral evaluation hearing, both parties and their respective lawyers will be present. Each side will take turns to present their case and evidence to the Evaluator. The process is more flexible than a Court hearing.

After considering all the evidence and legal arguments presented by both parties, the Evaluator will provide his/her evaluation on the relative merits of their case. The neutral evaluation will be non-binding (unless both parties agree in writing at the outset for the evaluation to be binding on them).

Even if it is non-binding, the parties may use the evaluation provided by the Evaluator as a reality check and a basis for achieving a consensual settlement of their disputed matters. The non-binding evaluation will be strictly confidential and will not be shared with the Court hearing the case if there is no resolution and the disputed matters proceed for adjudication.

Neutral evaluation services at FJC are presently available to parties in divorce proceedings commenced in FJC where the issues in dispute relate to financial ancillary matters such as division of matrimonial assets, child and / or spousal maintenance. Participation is voluntary. More information and details on the Family Neutral Evaluation programme at FJC may be found online at www.judiciary.gov.sg/family/mediation-counselling-in-family-justice-courts.

Neutral evaluation services are also provided by the Singapore Mediation Centre and by the Law Society of Singapore. More information and details can be found on the respective organisation's website.

4. What are the differences between Mediation and Neutral Evaluation?

You should choose the ADR option that best addresses your needs. To guide you on the various options available at FJC, please refer to the table below on the general features of Mediation, Neutral Evaluation, and Litigation. This is for general information only and is not legal advice. If you are legally represented, please ask your lawyers for advice on the options available to you.

Feature	Mediation	Neutral Evaluation	Litigation
What is it?	A Mediator	An Evaluator	A Family Judge makes
	• facilitates a	• evaluates evidence	a decision based on the
	resolution	• assesses strengths and	evidence and the law
• finds common		weaknesses of each	
ground		party's position based	
	• facilitates the	on the evidence	
	generation of	presented and the law	
	options	• offers case evaluation	
	• does not give legal	and best estimate of	
	advice	outcome if case	
		proceeds to	
		trial/hearing	
Principal	Interest-based	Evidence & law	Evidence & law
Focus	Consensus		
Key features	• Less costly	• Less costly	• Adjudication of the
	 Need not wait for 	 Need not wait for 	case by a Judge
	hearing	hearing	• Avenues of appeal
	 Confidential & 	• Confidential &	• Most costly
	without prejudice	without prejudice	• Time-consuming
	• Can achieve win-	(where it is a non-	
	win solutions	binding evaluation)	
	• Preserves	• Benefit of an opinion	
	relationships	by a subject-matter	
	• Parties have more	expert on your likely	
	control over	chances of success	
	outcome		
Role of	Process Guide	Evaluator of merits	Evaluator of merits
Neutral Third			Impartial decision-
Party			maker

	Enhances communication between the parties		Communication is limited to affidavits and lawyers' correspondence
Participation by parties	Variable, but larger role for parties	Variable, but mostly lawyers	Lawyers, parties' roles as witnesses
Format	Joint & private sessions	Joint sessions	Hearing

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Response to Offer of Amicable Resolution

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OA [number]/[year]

Sub Case No. [number]/[year]¹

Between [Applicant's name] [ID No.] ... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

RESPONSE TO OFFER OF AMICABLE RESOLUTION

Things to note:

- a) Consider seeking legal advice.
- b) The Court can order you to pay more costs to the other party if this Offer is found to be more favourable than the decision of the Court.
- 1. I am the [Enter party type here] in [Enter case number here].
- 2. I received the Offer of Amicable Resolution from the [Enter party type here] dated: Enter date here.
- 3. The Offer is still valid and has not been withdrawn.²
- 4. □ I wish to accept the Offer.³ (Proceed to sign.)
 □ I wish to reject the Offer.⁴ (Proceed to question 5.)

¹ To insert sub-case details if relevant.

² You cannot respond to an Offer which is no longer valid.

³ If you accept the Offer, the Court may record the agreed terms as a Court order.

⁴ If you wish to make a counteroffer when rejecting the Offer, you may complete a new Offer of Amicable Resolution (Form 50).

- 5. This is to certify that:
 - \Box (a) my solicitor has explained to me the following options to resolve this dispute other than by litigation ("**ADR Options**") such as:⁵
 - □ (i) available options for amicable settlement of disputes in Part 10A Women's Charter 1961, where applicable.
 - □ (ii) other available Alternative Dispute Resolution ("ADR") options, including:
 - \Box mediation
 - \Box neutral evaluation
 - \Box conciliation
 - □ (b) I am aware of the benefits of resolving this dispute using the above ADR Options, where applicable to my Court proceedings.

Х

Signature of party receiving Offer

Enter full name as per NRIC/Passport here.

Enter date here.

Х

*Signature of lawyer for party receiving Offer

*Enter name of lawyer and law firm here.

*Enter date here.

This Response is served on the [Enter name of party / party type here] on [Enter date here] in the manner set out in paragraph 5 of the Offer.

*Delete if inapplicable.

⁵ Refer to *Annex A* in the Offer of Amicable Resolution (Form 50) for details of the ADR Options.

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Withdrawal of Offer of Amicable Resolution

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OA [number]/[year]

Sub Case No. [number]/[year]¹

[ID No.] And

Between

[Respondent's name] [ID No.]

[Applicant's name]

... Respondent(s)

... Applicant(s)

WITHDRAWAL OF OFFER OF AMICABLE RESOLUTION

1. I am the [Enter party type here] [Enter case number here]. in

I made an Offer of Amicable Resolution² dated [Enter date here]. 2.

3. \Box The Offer is withdrawn on [Enter date here].

Signature

Enter full name as per NRIC/Passport here.

Enter date here.

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Х

¹ To insert sub-case details if relevant.

² If you wish to change the Offer, you should withdraw the current Offer and complete a new Offer of Amicable Resolution (Form 50).

This Withdrawal is served on the [Enter name of party / party type here]

on³ Enter date here.

 by post to Enter address here.
 by email to Enter email address here.
 by text message to

Enter mobile number here.

🗆 by

Enter other methods here.

³ As far as possible, you should use the other party's contact details in Court records.

53.

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Generated Originating Application

The Originating Application is valid only if engrossed with the seal of the Court and signature of the Registrar

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application No. FC/OA [number]/[year]

Between

Date of filing: [Date]

[Applicant's Name]¹ [ID No.]

...Applicant(s)

And

[Respondent's Name]¹ [ID No.]

...Respondent(s)

ORIGINATING APPLICATION FOR ORDERS PURSUANT TO SECTION(S) [NO.] OF [TITLE OF ACT]

²In the matter of [Name] (ID No.), a person alleged to lack capacity "P"

To the [Respondent / Counsel for the Respondent] [Respondent's name / Name of law firm]

> REGISTRAR FAMILY JUSTICE COURTS SINGAPORE

Applicant's address for service

[Applicant's name / Name of Applicant's counsel] [Address]

This case is fixed for this <u>Court event</u>: [Type of Hearing] on [date] at [time]. You <u>MUST</u> attend the Court event personally unless you are represented by your lawyers. Otherwise, <u>the Court can make orders in your absence</u>.

³This is a consent application.

¹ Where the Applicant sues or a Respondent is sued in a representative capacity, this Originating Application must be endorsed with a statement of the capacity in which the Applicant sues or a Respondent is sued, as the case may be.

² To be included for Originating Applications under the Mental Capacity Act 2008.

³ Delete if inapplicable.

³There is no Respondent in this application.

⁴This ORIGINATING APPLICATION may not be served more than 6 months after the date of its issue unless renewed by order of the Court.

⁵This ORIGINATING APPLICATION is renewed for service for [6 months] from [date] by the order of Court dated [date].

⁶This application relates to [the order of Court dated [date] in [case number]].

The Applicant is applying for:

1.	State the reliefs which you are claiming here.
2.	State the reliefs which you are claiming here.
3.	State the reliefs which you are claiming here.
4.	State the reliefs which you are claiming here (i.e. Costs).

³The reasons / evidence for this application are stated in the supporting affidavit.

³This application is filed without a supporting affidavit. I will refer to the following affidavits to support this application: <u>Enter name of person who filed the affidavit here</u> dated <u>Enter date here</u>.

⁴ Not applicable if there is no Respondent in this Originating Application.

⁵ Applicable if the Court has extended the validity of the Originating Application.

⁶ Use only if this application relates to an order obtained in a separate action, e.g. stay of Court order.

53A.

P.5, r.1, r.2, r.3, r.10, r.14, P.6, r.13, P.14, r.1(3), P.15, r.6(3)(a), P.20, r.3, P.21, r.1, P.23, r.2(3), P.24, r.4, P.25, r.4, P.29, r.2, r.5 FJ(G)R 2024 Para 83(1) PD (Part 14) PD 2024

Originating Application

When is this form used?

This form is used to commence proceedings where no specific form is provided. The Originating Application is filed on the eLitigation platform.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form when submitted to the Court, will be generated in accordance with the layout of the generated Originating Application (Form 53).

E-FORM

Section A: Details of Application

Please use Section A1 to A4 (where applicable) in the Originating Application: Generic Sections (Form 53B) to provide the details of application.

Section B: The Parties

Please use Section B in the Originating Application: Generic Sections (Form 53B) to provide the Parties' information.

Section 1: Relief(s) Claimed

PART A

I am applying for:

- 1. State the reliefs which you are claiming here.
- 2. State the reliefs which you are claiming here.
- 3. State the reliefs which you are claiming here.

PART B

- 4. Costs of this application
 - \Box No orders as to costs.
 - \Box Each party to bear own costs.
 - \Box Costs to be paid by

Enter name or party type here.

 \Box Costs to be reserved to

Enter event here.

 \Box Others:

Enter details here.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

5a. □ The reasons / evidence for this application are stated in the supporting affidavit.

You may use the Generic Affidavit Form (Form 54).

5b. □ This application is filed without a supporting affidavit. I will refer to the following affidavits to support this application:

Person who filed the affidavit	Date of filing
Enter details here.	Enter date here.
Enter details here.	Enter date here.
Enter details here.	Enter date here.

Please complete the table below.

53B.

E-FORM

Originating Application: Generic Sections

While best efforts were made to provide comprehensive information on the available options and guidance on when the options are commonly used, there may be situations which are not covered in this form. Please seek legal advice if you are unsure which application / option applies.

Section A-1: What are you filing?

\Box File a new case

To commence an originating application. *Proceed to Section A-2*.

□ File a Summons

To submit an application under a pending case.

□ File an Affidavit

To submit an affidavit which contains your reasons / evidence to support your application or respond to the other party's application.

□ File a Request

To make a request for hearing-related matters.

□ File a Document

Select this option for a complete listing of all documents which can be filed in your case.

□ File an Enforcement Document

To submit a document related to enforcement of court orders.

□ Extract an Order/Judgment

To obtain a sealed Court Order/Judgment made in the court proceedings.

Section A-2: New Case

This section is non-exhaustive and sets out the commonly filed applications. Only one option may be selected at a time.

Notes

Exception: You may file a summons in proceedings which have **concluded** for cases with these prefixes: FC/OAD, HCF/OADT, HCF/OADTV or FC/OAF, FC/OAFV.

For applications marked with an #, the Generic Originating Application (Form 53A) is to be used.

1. **Dissolution of marriage**

Divorce

You would like to end your marriage.

If you have been married for less than 3 years, you must have the Court's permission to commence Divorce proceedings.

- a. **Originating Application** for Divorce (<u>Simplified</u>)
- b. **Originating Application** for Divorce
- c. \Box Cross-Application for Divorce
 - (a) State the case number of the Originating Application: Enter case number here.
 - (b) State the date on which the Originating Application was served: Enter date here.

Judicial Separation

You do not wish to live together with your spouse but do not want or are unable to obtain a Divorce.

- d.
 Originating Application for Judicial Separation (Simplified)
- e. **Originating Application** for Judicial Separation

f. Cross-Application for Judicial Separation

- (a) State the case number of the Originating Application: Enter case number here.
- (b) State the date on which the Originating Application was served: Enter date here.

Nullity

Your marriage is invalid (i.e. void or voidable) under Sections 105 or 106 of the Women's Charter 1961.

g. **Originating Application** for Nullity

h. Cross-Application for Nullity

(a) State the case number of the Originating Application: <u>Enter case number here</u>. Notes

If you are applying for Dissolution of marriage, the Court will also address the ancillary matters as part of your application. Ancillary matters include

- (a) division of matrimonial assets;
- (b) maintenance;
- (c) custody, care and control and access of your child(ren); and
 (d) costs.

Hence, you are not required to make a separate application for Ancillary Matters. (b) State the date on which the Originating Application was served: <u>Enter date here</u>.

i. D Presumption of Death and Divorce

You have reasons to believe that your spouse is no longer living and would like the Court to grant a Divorce on this basis.

j. Permission to apply for Divorce within 3 years of marriage

> You are seeking to obtain the Court's permission to apply for a Divorce as you have been married for less than 3 years.

k. [#] Permission to proceed with Divorce without parenting programme documents

You are seeking to obtain the Court's permission to proceed with divorce without the required parenting programme documents.

1. # Part 10 Women's Charter 1961 Orders (Others)

You are applying for other orders under Part 10 Women's Charter 1961.

Proceed to Section A-3.

Variation / Rescission / Setting Aside of Orders

You would like to change a *final* order on maintenance or child(ren)-related matters previously made as part of ancillary matters in a dissolution case or other types of orders listed.

- m.
 Child(ren) Orders (Variation / Rescission) in a
 Dissolution Case
- n. Maintenance (Variation / Rescission) in a Dissolution Case
- ^{o.} [#]□ Variation, Rescission or Setting Aside of Other Orders in a Dissolution Case
- p. [#]□ Rescind Judgment of Judicial Separation (section 101(3) of the Women's Charter 1961)

2. Child(ren) Orders

You can only apply for Divorce if you have been married for at least 3 years. Otherwise, you must obtain the Court's permission to commence divorce proceedings.

This application is filed without notice i.e., without naming or serving a Respondent.

Include the specific section number under Part 10 Women's Charter 1961 at Section A-3.

Applications for variation or rescission:

If the order was made as part of the ancillary matters in a case with FC/OAD or HCF/OADT prefixes, file a summons under the said case instead. (excluding adoption of child(ren) under the Adoption of Children Act 2022 and return of child(ren) under the International Child Abduction Act 2010)

a. □ Child(ren) Orders (New Orders)

You are seeking an order to be the legal guardian of a child; OR

You would like the Court to determine:

- (a) who makes the major decisions for your child(ren)(i.e. custody)
- (b) who takes care of the child(ren) on a daily basis (i.e. care and control)
- (c) how often a parent sees the child(ren) (i.e. access)
- (d) how much the other parent is to contribute towards the child(ren)'s expenses (i.e. maintenance)

b. #□ Guardianship of Infants Act 1934 Orders (Others) You are applying for other orders under the Guardianship

of Infants Act 1934.

Proceed to Section A-3.

Variation, Rescission or Setting Aside of Orders

c. Child(ren) Orders (Variation / Rescission)

You would like to change a *final* order on child(ren)-related matters previously made by this Court.

d. ***□ Children Orders (Setting Aside)

You would like to revoke a *final order* on child(ren)-related matters previously made by this Court.

3. Orders under the International Child Abduction Act 2010 ("ICAA")

You would like the Court to determine whether a child under your custody has been wrongly removed from Singapore / wrongly detained outside of Singapore and seek an order for the child to be returned, or other orders under the ICAA.

- a. \Box Orders under section 8 of the ICAA
- c. $^{\#}\Box$ Orders under section 11 of the ICAA
- d. *[#]*□ ICAA Orders (Others)

Include the specific section number of the Guardianship of Infants Act 1934 at Section A-3.

Applications for variation, rescission or setting aside: If the final order was made as part of the ancillary matters in a case with FC/OAD or HCF/OADT prefixes, file a summons under the said case instead.

Include the specific section number of the International

Proceed to Section A-3.

e. [#] Variation, Rescission or Setting Aside of **ICAA Orders**

4. Orders in relation to adoption of child(ren) (below 21 years old) under the Adoption of Children Act 2022

You are seeking an order to be the legal parent(s) of a child (below 21 years old).

b. [#]□ All other orders relating to adoption order Proceed to Sections A-3 and A-4.

5. Orders in relation to mental capacity of a person

a. D Mental Capacity Act 2008 Orders

You would like the Court to grant you (and your coapplicants, if any) specific powers to make decisions for the benefit and welfare of a person who lacks mental capacity under the Mental Capacity Act 2008. *Proceed to Section A-3.*

b. *#* Mental Capacity Act 2008 Orders (General)

You are seeking other orders under the Mental Capacity Act 2008.

Proceed to Sections A-3 and A-4.

c. [#]□ Mental Capacity Orders (Variation, Rescission and Setting Aside)

You would like to change or revoke a *final* order previously made in a mental capacity case.

6. Other Originating Applications (Family)

a. □ Permission to seek disclosure

You require documents or information *before* commencement of legal proceedings

Child Abduction Act 2010 at Section A-3.

There are several preapplication procedures you must complete prior to making an application for adoption. Refer to the Ministry of Social and Family Development's website for details.

Include the specific section number of the Adoption of Children Act 2022 at Section A-3.

Refer to section 38(1) of the Mental Capacity Act 2008 and Part 5, Rule 7 of the Family Justice (General) Rules 2024 to ascertain if you need the Court's permission to file this application. You may concurrently seek the Court's permission in the same application.

Include the specific section number of the Mental Capacity Act 2008 at Section A-3.

This application is filed without notice i.e., without naming or serving a Respondent.

- (a) to identify possible parties
- (b) to trace your property OR
- (c) if there are good reasons otherwise.

b. □ Extension of time

You require extension of time to:

- (a) file an appeal and the deadline has lapsed
- (b) seek permission to appeal and the deadline has lapsed
- (c) file appeal documents and the appeal is deemed the withdrawn as the deadline has lapsed.

Financial Relief

- c. **Permission to seek financial relief after foreign divorce** You have been granted a divorce, judicial separation or nullity by a Court in another country on or after 1 June 2011, and seek this Court's permission to apply for financial relief.
- d.
 Financial relief after foreign divorce You have obtained the Court's permission to apply for financial relief.

e. Division of assets after Syariah Court divorce

You would like the Civil Court to determine how your matrimonial assets are to be divided pursuant to a divorce although your marriage comes under the Syariah Court's jurisdiction.

Variation, Rescission or Setting Aside of Orders

You would like to change or revoke a *final* order previously made in a financial relief case / division of assets case.

- f. D Maintenance (Variation, Rescission) in a financial relief case after foreign divorce
- g. [#]□ Variation, rescission, setting aside of other orders in a financial relief case after foreign divorce
- ^{h.} [#]□ Variation, rescission, setting aside of division orders after Syariah Court divorce

Protection from Harassment

If there are pending proceedings, you may apply for extension of time by filing a summons under the pending proceedings.

This application is filed without notice i.e., without naming or serving a Respondent.

Applications for variation, rescission or setting aside: If the final order was made in a case with FC (or HCF)/OAF prefix, file a summons instead.

You are seeking permission for orders under the Protection from Harassment Act 2014 ("POHA") to be made by the Family Courts.

j. Dependence of the protection from Harassment You have obtained permission for orders under the POHA to be made by the Family Court.

<u>General</u>

- k. *□ Originating Application (Generic)
 You would like to commence an application in the Family Justice Courts and no specific form is provided for your type of application.
- 1. $"\square$ Variation, rescission, setting aside of all other orders

Section A-3: Nature of case

For applications with specific forms to be used, the nature of case will be automatically selected in the filing platform.

If you had selected the following	Proceed to:
option from Section A-2:	
Option 11, 2b, 3d	Question 1(a)
Option 4b	Question 1(b) and 3
Option 5a	Questions 1(c) and 2
Option 5b, 5c	Questions 2 and 3
Option 6k	Questions 1(d) and 3
Options marked with an # (if not	Questions 3 and 4
already listed above)	

Select the applicable nature of case for applications listed in Section A-3 below.

1. Nature of case

a. [Enter section no.] of

□ Part 10 of the Women's Charter 1961 (for option 11 in Section A-2)

□ the Guardianship of Infants Act 1934 (for option 2b in Section A-2)

Notes

	□ the International Child Abduction Act 2010 (for option 3d in Section A-2) Proceed to question 3.	
b.	For option 4b in Section A-2: removal and placement of child upon unsuccessful adoption application (section 43(2)) persons to undergo mediation, counselling etc. post adoption proceedings (section 45) removal of publication or broadcast in contravention of Section 48 (section 49) removal of publication or broadcast in contravention of Section 51 (section 52) declaration that the consent of a relevant person is void - (section 56) removal of child from potential adopter – (section 57(6)) Enter section no.] of Adoption of Children Act 2022	All other orders relating to adoption order.
c.	 For option 5a in Section A-2: Appointment of Deputy or Court to make decision on behalf of Patient ("P") (section 20) Appointment of Deputy or Court to make decision on behalf of P (minors) (section 21) Court's determination of validity of Lasting Power of Attorney (section 17) Court's declaration on P's capacity to make decisions or on the lawfulness or otherwise of an act in relation to P (section 19) Others: [Enter section no.] of the Mental Capacity Act 2008. Proceed to questions 2 and 3. 	Mental Capacity Act 2008 Orders
d.	For option 6k in Section A-2: custody, care and control, access (s52(3)(c)) division of matrimonial assets (s52(3)(d)) payment of maintenance for children (s52(3)(c)) payment of maintenance for wife (s51(1), (2) or (3)) payment for mutaah for wife (s52(2) or (3)(b)) Others: [Enter section no.] of the Administration of Muslim Act 1966 Proceed to question 3.	If you are applying for enforcement of Syariah Court Order.

2. In the matter of

In the matter of

Input in this field is mandatory only for Originating Applications under option 5 (Orders in relation to mental capacity of a person).

For options 4b, 5b, 6k or options marked with an # in Section A-2:

3. Act of Parliament/Subsidiary Legislation

□ Current legislation □ Expired / Revoked / Spent legislation

In the matter of

Legislation: Enter legislation here Provision: Select the applicable option [Enter number here]

Sub-provision: Select the applicable option [Enter number here]

4. Is this application related to an order obtained in a separate action (e.g. an order obtained in IFAMS)?

 \Box No.

 \Box Yes.

State date of court order: Enter date here State case number: Enter case no. here

Paragraph / Part / Regulation / Rule / Schedule. The applicable options

The applicable options

are: Section / Appendix / Article / Order /

are: Sub-Section / Paragraph / Rule / Sub-Paragraph / Sub-Regulation / Sub-Rule.

Input in this field is mandatory if the Originating Application you are filing relates to an IFAMS order (i.e. made in matters with any of these prefixes: MSS, SS, BOSCO, AEO, FCNS, APP, starting with VA, ending with 'MO').

Section A-4: Endorsements

These options will be available for selection within your application (if applicable). Select only one option.

Available for these □ Application without notice There is no responding party to my application. (Applicable only if your case falls within those listed in to the Notes.) And 2024. □ Application by consent All parties have agreed to this application. \Box None of the above The application is taken out against a responding party and the Court is to decide on the application.

Section B: The Parties

1.

2.

3.

The information in this Section is not exhaustive and you may be required to provide additional personal details when submitting the application in Court. Additional details may relate to religion, occupation and marital status.

Use this Section to provide details for each party.

These are the details for: \Box the Applicant \Box the Respondent □ Others: <u>Please state the party type here.</u> Notes

options in Section A-2: a. Option 1k (Permission proceed with without divorce parenting program *documents*): b. Option 7a (Permission

Notes

to seek disclosure);

c. Option 7c (Permission to seek financial relief *after foreign divorce);*

applications referred to in Part 5, Rule 2 of the Family Justice (General) Rules 1. Do you have previous or existing Court proceedings in the Family Courts or Family Division of the High Court involving the same parties?

 \Box Yes.

State the case number in which the parties are identical to your application: <u>Enter case number here.</u>

 \Box No.

You can identify the Family Justice Courts cases by the prefix which will start with any of these: FC, HCF.

By providing the case number and if you are represented by the same lawyer as in the previous / existing case, some of the required information will be auto-populated from vour past cases. Therefore, you may not need to provide the information which are in grey boxes unless you need to update the information.

In the event that the information cannot be auto-populated at the time of submission, you will be asked to complete the information manually.

2.	Select the applicable option:		
		Proceed to	
	 This party is below 21 years old This party is mentally incapacitated 	Question 3A	
	□ This party is deceased / The party is an appointed Personal Representative ("PR")	Question 4	Not applicable for options 1a – 1i in Section A-2
	□ None of the above	Question 5	

Litigation Representative (for mentally incapacitated party OR minor party)

3A. The party is to be represented by a litigation representative.

Is there a Court order appointing the litigation representative?

The litigation representative must appoint a lawyer in all cases.

 \Box No.

Proceed to question 3B if this party is mentally incapacitated. Proceed to question 3C if this party is below 21 years old.

- Yes. State details of the order below and proceed to question 5.
 Case number: Enter case number here.
 Date of Court order: Enter date here.
- 3B. Is there a Mental Capacity Act 2008 ("MCA") order or Lasting Power of Attorney ("LPA") authorising the litigation representative to act on behalf of the party under disability?
 - □ No. File the Certificate by Solicitor acting for Litigation Representative (Form 74)
 - Yes. Date of MCA order or LPA:
 Enter date here.
 Attach a copy of the Court order or authorisation.

3C. File these documents:

- (i) the Consent to Act as Litigation Representative (Form 73).
- (ii) Certificate by Solicitor acting for Litigation Representative (Form 74) unless the date of MCA order or LPA in 3B is completed.

Proceed to question 5.

Personal Representative (for deceased party)

4. The deceased person is to be represented by a personal representative.

Is there a Court order appointing a personal representative of the estate?

 \Box No.

 \Box Yes. Provide the details below.

Case number:Enter case number here.Date of Court order:Enter date here.

If the person *filing* this application is an appointed Personal *Representative* ("PR"), you must have a Court order appointing you as the personal representative of the deceased's estate before уои can file this application. Otherwise, you may not have the legal standing to file this application.

Proceed to the next question regardless of which option you have selected.

If the application is filed against a deceased party, you may proceed without a Court order appointing a personal representative of the deceased's estate <u>at</u> <u>this stage</u>.

			inis siuge.
Perso	nal Details		
5.		e, identity number and country of issue entity number and the country of	At the time of filing, you will be asked for your a) identity type (i.e. SIN NRIC, SIN FIN, Foreign Passport etc); and b) the country of issue.
6.	The party's name (as st	ated in NRIC/Passport)	<i>b) inc country of issue.</i>
	Enter full name as per	NRIC/Passport here.	
7.	The party's gender		
	\Box Male \Box Female	2	
8.	The party's birth inform	nation	
	Race:	Enter race here.	
	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	Enter date here.	
		□ Singapore	
		☐ Others. Please state: Enter country here.	
	1	Enter country nere.	
9.	The party's address		
	Enter address here.		
10.	The party's citizenship		
10.			
	□ Singapore PR		
	□ Others:		
	Please specify:	Enter country here.	
11A.	The following fields an for dissolution of marri	re applicable only if you are applying age.	
	Other details of the par	tv	
	Occupation:	Enter details here.	
	Education level:	Enter details here.	
	Marital status before	Fater details have	
	current marriage:	Enter details here.	

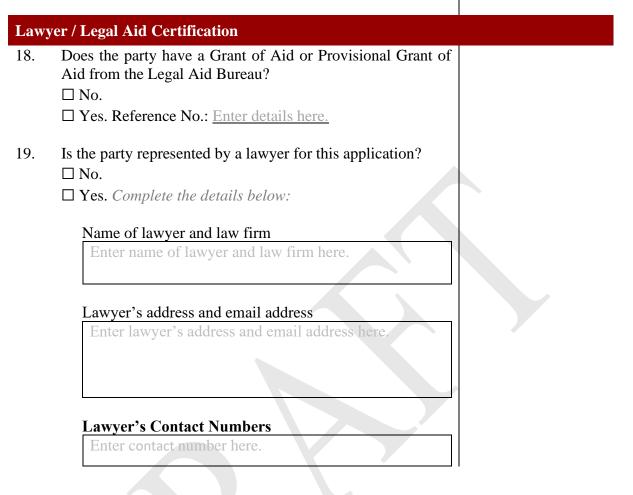
11B. The following fields are applicable only if you are applying for adoption of children proceedings.

	for adoption of child	ten proceedings.	
	Other details of the p Occupation: Religion: Marital status:	Enter details here. Enter details here. Enter details here.	
11C.	6	are applicable only if you are applying Section 8 / 14 of the International Child	
		ild er of appointment: <u>Enter date here</u> . e: <u>Enter relationship here</u> .	
		(applicable only if the party is a inted Personal Representative)	minor OR mentally
12.	Representative's NR you are making this	IC/FIN/Passport number (mandatory if application on behalf of the party) assport number here.	If the party is to be represented by another person (not a lawyer) for the reasons set out below, the person representing the party is known as the
13.		ne (as stated in NRIC/Passport) per NRIC/Passport here.	"representative". A person who is under 21 years old or mentally incapacitated must act through a <u>litigation</u> representative. A person who is deceased is <u>substituted</u> with a personal representative of the person's estate (pursuant to a grant of letters of administration or probate). Complete questions 12 and 13 if you are filing this application as a representative. If no personal representative

has been appointed to act for the estate of the deceased person, you may leave the fields blank.

14.	You must provide details of at least one contact number.	If you are the representative, provide
	0. 1.1 1	your contact details and
	Singapore mobile number	address.
	Enter mobile number here.	
	Singapore residential number	
	Enter residential number here.	
	□ I do not have a Singapore contact number.	
	You must provide either a Singapore address or your email address. Email	
	Enter email address here.	
15.	Address (in Singapore)	Provide the address at
	\Box Use the same address stated in question 9.	which you can receive Court notices. P.O. Boxes
	Enter address here.	are not acceptable.
Hear	ing Matters	
16.	Is the party able to attend hearings / conferences through video conference or teleconference (if applicable)?	Video conferences are conducted over virtual platforms such as Zoom.
	\Box Yes.	
	□ No. Provide your reason(s):	
	Enter reasons here.	
17.	Does the party require interpretation for Court hearings?	Should you require the
	\Box No.	Court to provide a translator in one of these
	□ Yes. State which language/dialect:	languages, please file a
	In 🗆 Mandarin 🗆 Malay 🗆 Tamil	Request for Hearing
	□ Chinese dialects: Select a dialect	<i>Administrative Support</i> prior to the Court event.
		The applicable options
		are: Cantonese / Hakka / Hokkien / Teochew. If you require
		interpretation in other languages, you must

arrange for an interpreter at your own expense.



Supporting Document(s) / Exhibit(s)

You must attach, with your application, a copy of the document(s) listed in Table 1 where applicable (collectively "Required Documents"). Depending on the type of Originating Application, the document(s) may be regarded either as "Supporting Documents" or "Exhibits".

Table 1

Supporting Document / Exhibit number	Reference in Form to the supporting document / exhibit (<i>e.g. Paragraph 1 of Section 5</i>)	Page numbers
E1	Copy of Mental Capacity Act order / Lasting Power of Attorney	Enter page no. here.
E2	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.

E3	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.
E4	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.
E5	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.

The supporting document(s) / exhibit(s) are to be attached from this page onwards.

54.

PDF UPLOAD

P.2, r.9, 16, 19, 20, P.3, r.29, 31 P.5, r.1, 4, 12, 13, 15, 16, 18, P.10, r.7, P.14, r.1, P.15, r. 5, 6, 24, 31, 33, P.20, r.3, P.21, r.1, P.23, r.2, P. 24, r.4, P.25, r.4, P.29, r.2, 5 FJ(G)R 2024 Para x, 24, x4, 71, 27, 57, 4, 2, 29, 83, y, PD 2024

Generic Affidavit

□ Supporting Affidavit □ Reply Affidavit □ Supporting and Reply Affidavit

When is this form used?

You can use this Form to provide evidence in support of your application or respond to the other party's application or affidavit. This is a general Form and should be used only if there is no specific Form provided for your matter.

Summons vs Application

If this affidavit is to be filed in <u>eLitigation</u>, please select <u>Summons</u>. If this affidavit is to be filed in <u>iFAMS</u>, please select <u>Application</u>.

Please delete the inapplicable references / sentences when using this Form, and renumber the paragraphs if necessary.

This form contains Notes to help you in the completion of the form. Please note that the Notes are **NOT** a substitute for legal advice. Please seek legal advice if necessary.

The Form for completion is from the next page onwards. This cover note need not be included in the filed affidavit.

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]¹

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]² Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

AFFIDAVIT

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/ Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

- 1a. I am the [enter party type i.e. Applicant or Respondent / witness for [party type] here] in [enter main case number here].³
- 1b. This affidavit is [in support of the summons / application]^ [and in reply to the affidavit by [enter name or party type here] dated [enter date here]]^.

[Others – Enter information here.]

1c. Where the facts in this affidavit affidavit [and <u>state the other document name here</u>][^] are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.⁴

¹ Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

² To insert sub-case details if relevant.

³ If you are filing this into **eLitigation**:

[•] You may refer to the Originating Application for your party type.

[•] Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

[•] You are not required to state the case number if you are filing this affidavit to support an Originating Application.

If you are filing this into iFAMS, you may refer to your main case for your party type.

⁴ You may also use this affidavit to attest to the truth of other documents. eg. Disclosure table. For any facts which you believe to be true, you should state the grounds for your belief.

Section 2: Statement

To note: .

- (a) Each paragraph in your statement is to be numbered consecutively
- (b) Dates, sums and other numbers must be expressed in figures and not in words.
- (c) Facts should be set out clearly and chronologically or in some other logical sequence.

Complete:

- (*i*) Paragraph 2a if this affidavit is to support your summons / application.
- (*ii*) *Paragraphs 2b to 2e if you are responding to a summons / application / affidavit.*
- *(iii)* Section 5 if you have supporting documents.

Statement to support my summons / application

2a. I set out the reasons for my summons / application:

iter details here.

Statement in response to an application / affidavit

Refer to each statement in the affidavit which you are responding to by the paragraph numbers. You must state clearly which statements you agree and disagree with.

For the statements which you disagree with, state your version of the facts. For example: I disagree with paragraph [x] of the other party's affidavit. [explain why or state your version].

- 2b. I refer to the Affidavit filed by [enter the name or party type of the deponent here] dated [enter date here] in [enter the summons number here].
- 2c. I [agree / disagree][^] with the summons / application.
- 2d. I [agree / disagree][^] with the reasons for this summons / application.
- 2e. Instead, I state as follows:

Enter details here.

Section 3: Summary of Claim

- 3a. \Box I am not making any claim.
- 3b. □ I am asking that the Court □ grants my summons / application] □ dismisses the summons / application filed by [enter the other party's name or party type here].
- 3c. \Box [Enter relief sought here.]

Section 4: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 5: Exhibit Content Page⁵

You must attach, with your application, a copy of the documents in Table 5-1 that is applicable to you and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 5-2. If you wish to provide an alternative document in lieu of a document that is applicable to you, please add the alternative document into Table 1 and indicate in Table 2 that you have provided an alternative document in lieu of the applicable document.

You may wish to refer to Part 9, Rule 16 of the Family Justice (General) Rules 2024 for the consequences of not providing the Required Documents.

Table 5-1

Exhibit number	Document Name / Reference in Affidavit to the exhibit (e.g. Paragraph 1 of Section 5)	Page numbers
E1	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.
E2	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.
E3	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.

Notes

Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification, eg. E1, E2, if the exhibit page starts as page 1.

⁵ Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit.

E4	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.
E5	Enter details of paragraph/section in which the exhibit relates to here.	Enter page no. here.

Table 5-2

If you are unable to provide the Required Documents, you must explain the lack of documents in the table below.

State the name of Required Document <u>not</u> provided	 (a) State the reasons for lack of document (b) If alternative document is provided instead, state the details of the alternative document.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

Please ensure that you have completed all relevant fields and attached all Required Documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards with the following exhibit cover page which is to be attested before a Commissioner for Oaths.

⁶This is the exhibit marked "[deponent's initials]1" referred to in the affidavit of [name of deponent] and sworn / affirmed^ before me on this [date].

Before me,

A Commissioner for Oaths

⁶ This is the exhibit cover page to be inserted between each exhibit number.

You are required to attest to each exhibit number before a Commissioner for Oaths.

You may group multiple documents of similar subject matter under 1 exhibit number.

E-FORM

□ Originating Application □ Summons for Children Orders (New orders only)

1. Use this Form to apply for new orders relating to:

(a) Custody, care and control, access of child(ren)

- With or without maintenance for children
- (b) Appointment of guardian of child(ren)
 - With or without maintenance for child(ren)
- (c) Orders under the Guardianship of Infants Act 1934
- (d) Orders under section 17(1)(d) of the Supreme Court of Judicature Act 1969
- The application for 1(a) is to be made by summons if there are pending court proceedings in the Family Justice Courts relating to the same child / spouse for any of these matters:
 (a) Divorce
 - (a) Divorce
 - (b) Nullity
 - (c) Judicial Separation
 - (d) Children orders.

If there are no pending court proceedings as stated above, the application for 1(a) is to be made by Originating Application.

If you are seeking for: **Use instead:** (a) Orders under Adoption of Children Act 1939 Originating Application for Adoption (Form 57) (b) Orders under International Child Abduction Act 2010 Application Originating for Orders under the International Abduction Act 2010 (Form 68) (c) Maintenance of children (without custody, care and Summons for maintenance control, access orders) (Form 56) OR Maintenance Complaint Form (Form 23A) AND there are pending proceedings in the Family Justice Courts for: н. Divorce; Nullity; Judicial Separation

3. Do <u>NOT</u> use this Form in the following situations:

(d) Maintenance of children (with or without spouse	Maintenance Complaint Form
maintenance)	(Form 23A)
AND	
there are NO pending proceedings in the Family Justice	
Courts for:	
 Divorce; 	
 Nullity; 	
 Judicial Separation 	
 Financial relief after foreign divorce 	
(e) Maintenance of children (with or without spouse	Summons for maintenance
maintenance)	(Form 56)
AND	
there are pending proceedings in the Family Justice	
Courts for	
 Financial relief after foreign divorce 	

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form, when submitted to the Court as an Originating Application, will be generated in accordance with the layout of the generated Originating Application (Form 53). If this Form is submitted to the Court as a Summons, it will be generated in accordance with the layout of the generated Summons (Form 67).

This Notice serves as a reminder to the Applicant and does not appear as part of the issued Originating Application ("OA").

IMPORTANT: Duty to consider amicable resolution

Pursuant to the Family Justice (General) Rules 2024 ("FJ(G)R 2024"), you are required to consider amicable resolution of the dispute before and after commencing Court proceedings. This means that you should either:

- a. explore alternative ways of settling the dispute without resorting to legal action; or
- b. make an offer to the other party to settle the dispute.

For more information on your obligations, please refer to the Information Sheet on Amicable Dispute Resolution and Part 4 of the FJ(G)R 2024.

Section 1: My Application

If you are filling this Form as a **Summons**, proceed to Question A.

If you are filling this Form as an **Originating Application**, proceed to Question B.

	The P	arties		
А.	I am	the Responde	in <u>Enter main case number here</u> . Int in <u>Enter main case number here</u> In party type here in <u>Enter main case</u>	If you are filing this application as a summons, refer to the main case for your party type. If you are filing as an Originating Application, select "Applicant". You must also complete the Originating Application: Generic Sections (Form 53B).
B.	This C	the Applicant the Responde	plication / summons is filed against in <u>Enter main case number here</u> . nt in <u>Enter main case number here</u> <u>r party type here</u> in <u>Enter main case</u>	If the application does not involve another party, you do not need to complete question B. If the application is against a person who is not an existing party to the proceedings, you must provide the details of the person in Section B of the Originating Application: Generic Sections (Form 53B).
	The C	Child / Childre	n	
C.	State t	he names of th	e child(ren) who is / are the subject ma	atter of this application:
	Enter	child name	Enter child's birth Ent certificate / identity birt number	ter child's date of h here
	Enter	child name		er child's date of h here
Proc	eed to	Part A for Part B for Part C for	Appointment of Guardian Custody, Care and Control and Acces	ss of Child(ren)
		rari U Ior	Maintenance for Child(ren)	

Part A: Appointment of Guardian

New order(s) you are seeking (Select options 2a, 2b or 2c as applicable. Otherwise use option 2d.)

- 2a. <u>Enter name here</u> to be appointed as guardian of the child(ren): <u>Enter name(s) of child(ren) here</u>.
- 2c. □ The guardian is to be appointed to act together with Enter name of parent / guardian here.
- 2d.
 Others: Enter your own order(s) below.

 Enter details here.

Part B: Custody, Care and control and Access of Child(ren)

To complete this Part, some commonly used orders (pre-populated orders) are provided for your selection. Select these orders ONLY if these are completely in line with your claim. If you select the pre-populated orders, the prayers will be auto-generated for your consideration. You may edit prior to submission to the court.

If the pre-populated orders are not suitable, you may state your prayers in the free-text boxes. You may refer to the Family Orders Guide for other types of orders.

New orders you are seeking (*Select options 3a, 3b, 3c or 3d as applicable*)

3a. □ Custody

State who is to have custody of the children:

<u>Pre-populated order(s)</u>

□ Both parties to have joint custody of the child(ren) of the marriage, namely

□ all children: Enter full names as per NRIC/Passport here

Child's name: Enter full name as per NRIC/Passport here

Other Order(s)

Enter your own orders below.

Enter orders here.

Use these references to prepare the orders: I = Applicant My spouse = Respondent Eg. The order should read: The Applicant (instead of "I") shall have sole custody of the children of the marriage.

3b. \Box Care and control

State who is to have care and control of the children:

Pre-populated order(s)

Which parent is to have care and control?		Which child(ren) does this care and control arrangement apply to?		
□ Applicant	shall have care	□ All children: Enter full name as		
□ Respondent	and control of	per NRIC/Passport here		
Enter full name as per	the child(ren)	P		
NRIC/Passport here	of the marriage,	□ Child's name:		
	namely	Enter full name as per		
		NRIC/Passport here		
□ Applicant		□ All children: Enter full name as		
		per NRIC/Passport here		
□ Respondent		per tricle/1 assport here		
□ Enter full name as per		□ Child's name:		
NRIC/Passport here		Enter full name as per		
		NRIC/Passport here		
		111110/1 0000010 11010		

Other Order(s)

Enter your own orders below.

Enter orders here.

Use these references to prepare the orders: I = Applicant My spouse = Respondent Eg. The order should read: The Applicant (instead of "I") shall have care and control of the children.

3c. \Box Access:

State the access orders and any other orders related to the child(ren)'s arrangements:

Pre-populated Order(s)

\Box Reasonable access

Which parent is to have access?	Which child(ren) does this access arrangement apply to?
□ Applicant	□ All children
□ Respondent	
Enter full name as per	
NRIC/Passport here	

□ Weekly access

Which parent is to have access?	Which child(ren) does this access arrangement apply to?	Details of access
 Applicant Respondent Enter full name as per <u>NRIC/Passport here</u> 	□ The children	Start of access: <u>Enter day here</u> at <u>Enter</u> <u>time here</u> . End of access: <u>Enter day here</u> at <u>Enter</u> <u>time here</u> .

□ Applicant	□ All children	Start of access:
 Respondent Enter full name as per 	□ Child's name: Enter full name as per	Enter day here at Enter time here.
<u>NRIC/Passport here</u>	<u>NRIC/Passport here</u>	End of access: Enter day here at Enter time here.

Other Order(s) Enter your own orders below. Enter orders here. Use these references to prepare the orders: I = Applicant My spouse = Respondent Eg. The order should read: The Respondent (instead of "my spouse") shall have reasonable access to the children from [day] at [time].

3d. Other Order(s)

Other Order(s)

Enter your own orders below.

Enter orders here.	

Part C: Maintenance for Child(ren)

To complete this Part, some commonly used orders (pre-populated orders) are provided for your selection. Select these orders ONLY if these are completely in line with your claim. If you select the pre-populated orders, the prayers will be auto-generated for your consideration. You may edit prior to submission to the court.

If the pre-populated orders are not suitable, you may state your prayers in the free-text boxes. You may refer to the Family Orders Guide for other types of orders.

New orders you are seeking

4. □ Maintenance

Pre-populated order(s)

4a. □ Monthly maintenance

Which parent is to pay maintenance?	Which child(ren) is the maintenance for?	Monthly amount to be paid
□ Applicant □ Respondent	 Each child The child The children 	Enter amount here.

1st payment date: <u>Enter date here.</u> Recurring payment date: <u>Enter date here.</u>

4b. \Box Payment to the party's bank account

Whose bank account?	Which bank?	Account number
---------------------	-------------	----------------

□ Applicant	Enter name of bank here.	Enter bank account
□ Respondent		number here.

4c. Other Order(s) Enter your own orders below. Use these references to prepare the orders: I = Applicant My spouse = Respondent Eg. The order should read: The Respondent (instead of "my spouse") shall pay \$x as monthly as maintenance for the children.

Part D: Others

If you are seeking any other relief(s), state them below. You must also cite the relevant provisions in the Act under which you are seeking such reliefs.

5. State the relief sought here.

Pursuant toState the provision in the Act.
(e.g. Section 5)State the Act.
(e.g. Guardianship of Infants Act 1934)

Part E: Costs

6. Costs of this application

- \Box Costs in the cause.
- \Box No orders as to costs.
- \Box Each party to bear own costs.
- \Box Costs to be paid by:

Enter name or party status here.

 \Box Costs to be reserved to

Costs in the cause means the costs of this application will be decided at and will depend on the outcome of the main proceedings. This option is applicable only if you are filing a summons.

Enter event here.

 \Box Others:

Enter details here.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

The reasons for this Application are stated in the supporting affidavit.

Affidavit

- A. Unless paragraph B applies, complete <u>all</u> questions and details in Sections 1 to 9 unless otherwise stated.
- B. If you have <u>only</u> selected "Others" in the Summons, ie. Part D in Section 1 (My Application), complete all questions and details in Sections 1 to 4 in the affidavit. Complete all other Sections where applicable to your application.

The relevant exhibits and supporting documents are to be included at Section 10.

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/ Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

- 1a. I am the Applicant.
- 1b. This affidavit is in support of the Originating Application / summons.
- 1c. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.
- 1d. I am seeking orders stated in the Originating Application / summons for the following child / children:

Enter child name	Enter child's birth certificate /	Enter child's date of birth
	identity number	here
Enter child name	Enter child's birth certificate /	Enter child's date of birth
	identity number	here
(Add additional rows if r	required)	

Section 2: Applicant's Relationship with the Child(ren)

State how you are related to the child(ren):

If more than 1 question applies to you, go to the earliest question which applies, e.g. if questions 1 and 3 apply, complete question 1 ONLY.

Question 1 if you are theProceed toQuestion 2 ifQuestion 3 for

parent or court-appointed guardian the parent(s) is / are deceased / you are the parent appointed by the deceased parent all other relationships

Parent or Court-appointed guardian

1. \Box I am the \Box parent \Box court-appointed guardian of the child / children.

Proceed to Section 3.

Parent(s) are deceased / you are the guardian appointed by the deceased parent

Answer <u>all</u> the questions under this sub-header unless informed otherwise.

2. Details of the death of the parent(s)

The details of death of the parent(s) of the child / children are as follows:

	□ Father	□ Mother
Name	Enter name here	Enter name here
Date of death	Enter date here.	Enter date here.

2a. □ I am the guardian appointed by the deceased parent and the child / children has a surviving parent. The deceased parent appointed me through <u>State the document of appointment</u>. *Proceed to questions 2b and 2c*.

 \Box There are no surviving parents of the child / children and no guardian has been appointed by the child / children's deceased parent(s). *Proceed to question 2c*.

 \Box I am the guardian appointed by the deceased parent(s) and the child / children has no surviving parents. The deceased parent(s) appointed me through <u>State the document</u> of appointment. *Proceed to question 2c.*

2b. If only one (1) parent is deceased, explain why the surviving parent is not filing this application.

Enter details here.

2c. Explain if you are related to the child(ren) by blood or marriage:

Enter details here.

Proceed to Section 3.

Other relationships

Answer the questions in order.

3a. Explain how you are related to the child(ren):

Enter details here.

3b. Are you applying for return of child to the lawful guardian?

 \square No. Proceed to question 3c.

□ Yes. Explain why you are considered the lawful guardian:

Enter details here.

Proceed to Section 3.

- 3c. Are you applying to remove or substitute a guardian?
 □ No Proceed to question 3d.
 □ Yes. Proceed to Section 3.
- 3d. Under the law, you may not have the required connection with the child(ren) to make this application. Explain the special circumstances which will allow you to make this application:

Enter details here.

Proceed to Section 3.

Section 3: Connection with Syariah Court Divorce

1. Is / Are the child(ren) born of a marriage under Islamic law?

□ No. Proceed to Section 4.□ Yes. Proceed to question 2.

- 2. Are there ongoing divorce proceedings between the parents in Syariah Court? □ No. *Proceed to Section 4.*
 - □ Yes. Complete Notice of Syariah Court proceedings (Form 58) and proceed to Section 4.

Section 4: Child(ren)

Complete Table 4-1 for the child who is the subject matter of this application.

If there is more than one child as the subject matter of this application, please complete Table 4-1 for <u>each</u> child.

<u>Table 4-1</u>				
Name	Enter full name as per NRIC/Passport he	ere.		
NRIC / Passport number	Enter NRIC/Passport no. here.	Gender	□ Female □ Male	
Date of Birth (DD/MM/YYYY)	Enter date here.	Age	Enter age here.	
Any health condition which will affect the child's living expenses or care arrangements?	Enter details here.			
	Court orders / Proceedings relating to	this Child		
Is the child	□ Yes □ No			
protected by an existing Personal	Case number (if issued by this Court): Enter case number her		number here.	
Protection	Date of order:Enter date here.			
Order?	State the brief details of the order:			
	Enter details here.			
Are there	□ Yes □ No			
existing Youth Court order(s) or	Case number:	Enter case number here.		
ongoing Youth	Date of order:	Enter date here.		
Court	Nature of order / proceedings:	Enter details here.		
proceedings?	proceedings? State the person against whom the order was made:			
	Enter full name as per NRIC/Passport he	ere.		
Is there an	□ Yes □ No			
existing	Case number:	Enter case	number here.	
voluntary	Date of arrangement:	Enter date here.		

arrangement	Expiry date of the arrangement:	Enter date here.
with the Child	Expiry due of the arrangement.	Litter dute nere.
Protection		
Services under		
the Ministry of		
Social and		
Family		
Development?		
Is there an	\Box Yes \Box No	
existing court order for this	Case number (if issued by this Court):	Enter case number here.
child's	Date of order:	Enter date here.
maintenance?	State the brief details of the order:	
	Enter details here.	
	Complete in subject the conference and the	Enternant and and
	Country in which the order was made (if issued outside of Singapore):	Enter country here.
T (1)		
Is there an	\Box Yes \Box No	
existing court	Case number (if issued by this Court):	Enter case number here.
existing court order for this		Enter case number here. Enter date here.
existing court	Case number (if issued by this Court):	
existing court order for this child's living and	Case number (if issued by this Court): Date of order:	
existing court order for this child's living and contact	Case number (if issued by this Court): Date of order: State the brief details of the order:	
existing court order for this child's living and contact	Case number (if issued by this Court): Date of order: State the brief details of the order:	
existing court order for this child's living and contact arrangements?	Case number (if issued by this Court): Date of order: State the brief details of the order: Enter details here. Country in which the order was made (if issued outside of Singapore):	Enter date here.
existing court order for this child's living and contact arrangements? Are there other	Case number (if issued by this Court): Date of order: State the brief details of the order: Enter details here. Country in which the order was made	Enter date here.
existing court order for this child's living and contact arrangements? Are there other court orders	Case number (if issued by this Court): Date of order: State the brief details of the order: Enter details here. Country in which the order was made (if issued outside of Singapore):	Enter date here.
existing court order for this child's living and contact arrangements? Are there other court orders such as adoption	Case number (if issued by this Court): Date of order: State the brief details of the order: Enter details here. Country in which the order was made (if issued outside of Singapore):	Enter date here.
existing court order for this child's living and contact arrangements? Are there other court orders such as adoption orders or orders	Case number (if issued by this Court): Date of order: State the brief details of the order: Enter details here. Country in which the order was made (if issued outside of Singapore):	Enter date here.
existing court order for this child's living and contact arrangements? Are there other court orders such as adoption orders or orders under the Mental	Case number (if issued by this Court): Date of order: State the brief details of the order: Enter details here. Country in which the order was made (if issued outside of Singapore):	Enter date here.
existing court order for this child's living and contact arrangements? Are there other court orders such as adoption orders or orders under the Mental Capacity Act	Case number (if issued by this Court): Date of order: State the brief details of the order: Enter details here. Country in which the order was made (if issued outside of Singapore):	Enter date here.
existing court order for this child's living and contact arrangements? Are there other court orders such as adoption orders or orders under the Mental	Case number (if issued by this Court): Date of order: State the brief details of the order: Enter details here. Country in which the order was made (if issued outside of Singapore):	Enter date here.

If you are only applying for child(ren) maintenance, proceed to Section 7. Otherwise, continue to Section 5.

Section 5: Child(ren)'s Care Arrangements

For all child(ren), state their living arrangements. (*Compete Table 5-1 for each child if the arrangement for each child is different.*)

Table 5-1

	living arrangements below apply	y to:
	All children Child: Enter full name as per	NRIC/Passport here
Pre	sent arrangements	
(a)	State who is the child(ren) living with presently:	Enter details here.
(b)	Provide brief details of this arrangement:	Enter details here.
(c)	State all other adults who are living with the child(ren) and how they are related to the child(ren):	Enter details here.
(d)	State when this arrangement started:	Enter details here.
(e)	Is this arrangement due to an existing court order? State the date of the court order.	Enter details here. Date of Court Order: Enter date here.
(f)	If the child(ren) are not living with either parent, state if the child(ren) have contact with the parent(s) who is not living with the child:	Enter details here.
	Provide details such as frequency and length of contact, if this is a regular arrangement.	
(g)	Provide details of the most recent contact:	Enter details here.
	E.g. date, time, manner of contact	
(h)	Provide details of the financial support for the child(ren).	Enter details here.
	E.g. the person(s) who maintain the child, how the person maintains the child,	

	when did this arrangement start.				
Pro	Proposed future arrangements				
(i)	State who the child(ren) will live with in future:	Enter details here.			
(j)	Provide brief details of this arrangement:	Enter details here.			
(k)	State the contact which the child(ren) will have with the parent who is not living with the child(ren): Provide details such as	Enter details here.			
	frequency and length of contact.				
(1)	Provide details of the financial support for the child(ren).	Enter details here.			
	E.g. the person(s) who maintain the child, how the person maintains the child, whether the person is an undischarged bankrupt.				
	If the person is an undischarged bankrupt, how would the person support the child financially.				
,	 if there are any significant is children/this child (E.g. healt the reasons for the proposed if 				
	vide brief details to support your	statement(s).			

Proceed to

Section 6 for Section 7 if Child(ren) maintenance you are not applying for child(ren) maintenance

Section 6: Maintenance for Child(ren)

Section 6-1: New Maintenance for Child(ren)

Part 1: Sources of Income

If you are a <u>parent</u>:
 □ My income is as follows:

If you are a <u>non-parent</u>: ☐ My family's income is as follows: (Complete the right-most column of the table as well.)

	Table 6-1-1 (Use additional rows if required) Complete				
S/N	Source of income	Provide details of the source of income, e.g. name of of employer / property / business.	Amount per month (in SGD)	State who is the income - earner	
(a)	 Salary Rental Business profits Endowment / CPF payouts Financial Assistance Others: Enter details here. 	Enter details here.	Gross: \$ Enter amount here. Nett: \$ Enter amount here.		
(b)	 Salary Rental Business profits Endowment / CPF payouts Financial Assistance Others: Enter details here. 	Enter details here.	Gross: \$ Enter amount here. Nett: \$ Enter amount here.		
		Monthly Total	Gross: \$ Enter amount here.		

	Nett: Enter	
	amount here.	

Part 2: Family expenses

2. My personal expenses are as follows:

(Use additional rows for items not listed if required.)

Table 6-1-2				
S/N	Items	Amount per month (in SGD)	<u>Notes</u>	
(a)	Food	Enter amount here.	If an expense is not incurred monthly,	
(b)	Transport / Fuel expenses	Enter amount here.	please state the	
(c)	Utilities	Enter amount here.	amount as a monthly average.	
(d)	Telephone, Internet, Cable TV charges	Enter amount here.	Ea if the surrange is	
(e)	Medical expenses	Enter amount here.	<i>Eg. if the expense is</i> \$60 every 3 months,	
(f)	Rent	Enter amount here.	you should state it as \$20 per month.	
(g)	Insurance premiums	Enter amount here.	\$20 per monun.	
(h)	Payment of debts	Enter amount here.		
	Complete question 2a in this Section.			
(i)	Maintenance	Enter amount here.		
(j)	Tax payments	Enter amount here.		
(k)	Financial provision for: Enter name of person here. Complete question 2b in this Section.	Enter amount here.	Item (k) refers to the support you give to persons besides the child(ren), e.g.	
(1)	Enter details here.	Enter amount here.	extended family or ex-	
(m)	Enter details here.	Enter amount here.	spouse.	
(n)	Enter details here.	Enter amount here.		
(0)	Enter details here.	Enter amount here.		
	Monthly TOTAL	Enter amount here.		

2a. The debts in item (h) in table 6-1-2 are:

S/N	Name of creditor and Account number	Nature of debt / loan (eg. personal loan, credit card / credit line)	Amount outstanding as of Enter date here.
(a)	Enter name of creditor and account number here.	Enter nature of debt/loan here.	\$ Enter amount here.

(b)	Enter name of creditor and account number here.	Enter nature of debt/loan here.	\$ Enter amount here.
		TOTAL	\$ Enter amount here.

2b. The financial provision in item (k) in table 6-1-2 is:

S/N	Nameofpersonand/oryourrelationshipwiththe person	How are the monies paid?	How often are the monies paid?	Amount per month (in SGD)
(a)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	☐ Monthly ☐ Others: Enter details here.	Enter amount here.
(b)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	□ Monthly □ Others: Enter details here.	Enter amount here.
Ţ.		Monthly TOTAL	Enter amount here.	

The monthly expenses for the child(ren)'s are: (Use additional rows for items not listed.) 3.

Table 6	<u>-1-3</u>						
			If an expense is not incurred m To explain an unusual exp		ne amount as a monthly averag s in the "remarks" column.	ge.	
		Name of child: Enter name of child here.		Name of child: Enter name of child here.		Name of child: Enter name of child here.	
S/N	Items	Amount per month (in SGD)	Remarks	Amount per month (in SGD)	Remarks	Amount per month (in SGD)	Remarks
1	Food (including milk)	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
2	Transport	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
3	Mobile phone charges	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
4	Pocket money	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
5	School fees	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
6	Enrichment fees	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
7	Extracurricular expenses	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
8	Schoolbooks, school uniform	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.

9	Insurance premiums	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
10	Enter details here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
11	Enter details here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.
S	UB-TOTAL (1)	\$ Enter amoun	t here. (2)	\$ Enter amoun	t here. (3)	\$ Enter amoun	nt here.
Monthly TOTAL of $(1) + (2) + (3)$ (4) \$ Enter amount here.					nt here.		

Proceed to Section 6-2

Section 6-2: Financial Resources and Standard of Living

1. Circumstances which affect income or ability to maintain self or child(ren)

A. These are my available financial resources. *(Use additional rows if required)*

Table 6-2-1						
S/N	Financial resource / Asset (E.g. bank account)	Value (SGD)	Is the resource used to pay for your personal expenses / child(ren)'s expenses? If no, explain the reasons.			
1.						
2.						

B. If there are circumstances which will significantly affect your income or contribution to your child(ren), please state briefly your circumstances, the history or reasons, and how it affects your income or contribution.

Notes: For easy reference, number each paragraph and sub-points clearly. Use headers or titles to identify different issues.

Enter details here.

If you would like the Court to consider the standard of living enjoyed by the child(ren), provide brief details below:

Notes: For easy reference, number each paragraph and sub-points clearly. Use headers or titles to identify different issues.



Proceed to Section 7

Section 7: Reasons for the Application

For all applications, state in detail the reasons for your application and why your application is in the best interests of the child(ren).

(Notes: For easy reference, number each paragraph and sub-points clearly. Use headers or titles to identify different issues.)

Enter details here.

Section 8: Summary of Claim

1. \Box I am asking that the Court grants this Originating Application / summons.

\Box Others:

Enter details here.

Section 9: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 10: Exhibit Content Page

You must attach, with your application, a copy of the documents in Table 10-1 (if applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 10-2.

You may wish to refer to Part 9, Rule 16 of the Family Justice (General) Rules 2024 for the consequences of not providing the Required Documents.

Table 10-1	Table 10-1				
Exhibit number	Reference in Form to the exhibit (<i>e.g. Paragraph 1 of Section 5</i>)	Page numbers			
Section 2					
E1	Document evidencing appointment of guardian by deceased parent (e.g. a copy of parent's will or Order of Court)	Enter page no.			
E2	Translated copy of document evidencing appointment of guardian by deceased parent (e.g. a copy of parent's will or Order of Court), if not in English	Enter page no.			

Notes

Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification, eg. E1, E2, if the exhibit page starts as page 1.

			1
	The translation must be done by either a		
	Court interpreter or a certified translator		
	with proof of the translator's certification.		
E3	Death certificate(s) of parent(s)	Enter	
		page no.	
E4	Translated copy of death	Enter	
	certificate(s) of parent(s), if not in	page no.	
	English	puge no.	
	Lightin		
	The turn duties much be deve by side of		
	The translation must be done by either a Court interpreter or a certified translator		
	with proof of the translator's certification.		
Section 3	with proof of the transition's certification.		
		E (
E5	Completed Notice of Syariah Court	Enter	
	proceedings (Form 58)	page no.	
E6	Syariah Court commencement	Enter	
	certificate (referred to in paragraph	page no.	
	3a of the Notice of Syariah Court		
	Proceedings Form)		
F 7		Entry	
E7	Syariah Court continuation	Enter	
	certificate (referred to in paragraph	page no.	
	3b of the Notice of Syariah Court		
	Proceedings Form)		
50		Enter	
E8	Consent and Svariah Court	Enter	
E8	Consent and Syariah Court certificate of attendance (referred to		
E8	certificate of attendance (referred to	page no.	
E8	certificate of attendance (referred to in paragraph 3c of the Notice of		
	certificate of attendance (referred to		
Section 4	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form)	page no.	
Section 4	certificate of attendance (referred to in paragraph 3c of the Notice of		
Section 4	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form)	page no.	
Section 4 E9	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s)	page no. Enter	
Section 4 E9	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth	page no. Enter page no. Enter	
Section 4 E9	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s)	page no. Enter page no.	
Section 4	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English	page no. Enter page no. Enter	
Section 4 E9	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a	page no. Enter page no. Enter	
Section 4 E9	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator	page no. Enter page no. Enter	
Section 4 E9 E10	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification.	Enter page no. Enter page no.	
Section 4 E9 E10	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document	page no. Enter page no. Enter page no.	
Section 4 E9 E10	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable	Enter page no. Enter page no.	
Section 4 E9 E10	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order,	page no. Enter page no. Enter page no.	
Section 4 E9 E10	 certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order, Youth Court order, voluntary 	page no. Enter page no. Enter page no.	
Section 4 E9 E10	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order,	page no. Enter page no. Enter page no.	
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Section 4 E9 E10	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order, Youth Court order, voluntary arrangement with MSF, existing order for child(ren)'s maintenance,	page no. Enter page no. Enter page no.	
Section 4 E9	 certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order, Youth Court order, voluntary arrangement with MSF, existing order for child(ren)'s living 	page no. Enter page no. Enter page no.	
Section 4 E9 E10	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order, Youth Court order, voluntary arrangement with MSF, existing order for child(ren)'s maintenance, existing order for child(ren)'s living and contact arrangements or any	page no. Enter page no. Enter page no.	
Section 4 E9 E10 E11	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order, Youth Court order, voluntary arrangement with MSF, existing order for child(ren)'s maintenance, existing order for child(ren)'s living and contact arrangements or any other related orders).	page no. Enter page no. Enter page no.	
Section 4 E9 E10 E11 Section 6-1 (7	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order, Youth Court order, voluntary arrangement with MSF, existing order for child(ren)'s maintenance, existing order for child(ren)'s living and contact arrangements or any other related orders). Table 1)	page no. Enter page no. Enter page no.	
Section 4 E9 E10 E11	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order, Youth Court order, voluntary arrangement with MSF, existing order for child(ren)'s maintenance, existing order for child(ren)'s living and contact arrangements or any other related orders).	page no. Enter page no. Enter page no.	
Section 4 E9 E10 E11 E11	certificate of attendance (referred to in paragraph 3c of the Notice of Syariah Court Proceedings Form) Copy of child(ren)'s birth certicate(s) Translated copy of child(ren)'s birth certicate(s), if not in English The translation must be done by either a Court interpreter or a certified translator with proof of the translator's certification. Relevant Order of Court / document relating to child(ren), if applicable (e.g. Personal Protection Order, Youth Court order, voluntary arrangement with MSF, existing order for child(ren)'s maintenance, existing order for child(ren)'s living and contact arrangements or any other related orders). Table 1)	page no. Enter page no. Enter page no. Enter page no.	

E13 Current employment contract OR Enter similar evidence showing the page no.	
current terms of my employment	
E14 Tax assessment notices or similar Enter	
documents for the past 3 years page no.	
E15 Updated ACRA search results or Enter	
similar documents to show page no.	
ownership of my businesses	
E16 Current tenancy agreement or Enter	
similar evidence showing the rental page no.	
I receive	
E17 Updated search results on my Enter	
bankruptcy status (if the Applicant page no.	
is an undischarged bankrupt)	
Section 6-1 (Tables 2 & 3)	
E18 Documents to prove my monthly Enter	
expenses page no.	
E19 Evidence of debt(s) owed Enter	
page no.	
E20 Evidence on financial provision for Enter	
dependents page no.	
E21 Documents to prove the child(ren)'s Enter	
monthly expenses page no.	
All Other Evidence to Support Application	
E22 Enter details of paragraph/section in Enter	
which the exhibit relates to. page no.	
E23 Enter details of paragraph/section in Enter	
which the exhibit relates to. page no.	
which the exhibit relates to.page no.E24Enter details of paragraph/section inEnter	
E24Enter details of paragraph/section in which the exhibit relates to.Enter page no.	
E24Enter details of paragraph/section in which the exhibit relates to.Enter page no.E25Enter details of paragraph/section in EnterEnter	
E24Enter details of paragraph/section in which the exhibit relates to.Enter page no.	
E24Enter details of paragraph/section in which the exhibit relates to.Enter page no.E25Enter details of paragraph/section in EnterEnter	

(Expand the table if required)

<u>Table 10-2</u>					
State the name of the Required Document not	(a) State the reasons for lack of document				
provided	(b) If alternative document is provided instead, state the alternative document.				
Enter details here.	Enter details here.				
Enter details here.	Enter details here.				

Enter details here.	Enter details here.		
Enter details here.	Enter details here.		
Enter details here.	Enter details here.		
(Expand the table if required)			

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the Family Justice (General) Rules 2024 to be placed between each distinct exhibit.

55B.

PDF UPLOAD

P.2, r.19, P.5, r.1, r.3, r.5, r.15 FJ(G)R 2024

□ Originating Application □ Summons for Children Orders (Variation / Rescission)

- 1. This Form is used to apply for variation or rescission of orders relating to:
 - (a) Custody, care and control, access of child(ren)
 - With or without maintenance for child(ren)
 - (b) Appointment of guardian of child(ren)
 - With or without maintenance for child(ren)

(c) Maintenance of child(ren), provided the orders were made in the Family Justice Courts with the prefix "OAG" or "OAGV" or "OSG" or "OSF" (under section 17(1)(d) of the Supreme Court of Judicature Act 1969).

The application for orders set out in paragraph 1 above is to be made by summons if:

 (a) there are court proceedings (whether pending or concluded) relating to the same child(ren) with the prefix "OAD", "OADT", "OADV", "OADTV"
 (b) there are pending court proceedings relating to the same child(ren) with the prefix "OAG", "OAGV".

In all other situations, the application for orders set out in paragraph 1 is to be made by Originating Application.

3. Do <u>NOT</u> use this Form in the following situations:

If you are seeking for variation or rescission of:	Use instead:
(d) Maintenance of children (without custody, care and	Originating Application /
control, access orders),	Summons for Maintenance
AND	(Variation / Rescission)
the order to be varied or rescinded was made in the	(Form 56B)
Family Justice Courts with the prefix "OAD",	
"OADT", "OADV", "OADTV", "D", "DT".	
(b) A maintenance order with the prefix "MO", "EMO".	Written Complaint
	(Maintenance related
	matters) (Form 23A)
(e) Maintenance of children (with or without spouse	Originating Application /
maintenance)	Summons for Maintenance
AND	(Variation / Rescission)
The order to be varied or rescinded was made in the	(Form 56B)
Family Justice Courts after a foreign divorce (pursuant to	
section 121B Women's Charter 1961).	

This form contains Notes to help you in the completion of the form. Please note that the Notes are \underline{NOT} to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form, when submitted to the Court as an Originating Application, will be generated in accordance with the layout of the generated Originating Application (Form 53). If the form is submitted to the Court as a Summons, it will be generated in accordance with the layout of the generated Summons (Form 67).

This Notice serves as a reminder to the Applicant and does not appear as part of the issued Originating Application ("OA").

IMPORTANT: Duty to consider amicable resolution

Pursuant to the Family Justice (General) Rules 2024 ("FJ(G)R 2024"), you are required to consider amicable resolution of the dispute before and after commencing Court proceedings. This means that you should either:

- c. explore alternative ways of settling the dispute without resorting to legal action; or
- d. make an offer to the other party to settle the dispute.

For more information on your obligations, please refer to the Information Sheet on Amicable Dispute Resolution and Part 4 of the FJ(G)R 2024.

Section 1: My Application

If you are filling this Form as a **Summons**, proceed to Question A.

If you are filling this Form as an **Originating Application**, proceed to Question B.

The	Parties		
A.	I am	the Applicant in <u>Enter main case number here</u> . the Respondent in <u>Enter main case number here</u> <u>Enter name or party type here</u> in <u>Enter main case</u> <u>number here</u> .	If you are filing this application as a summons, refer to the main case for your party type. If you are filing as an Originating Application, select "Applicant." You must also complete the Originating Application: Generic Sections (Form 53B).
B.	This C	Originating Application \Box summons is filed against the Applicant in Enter main case number here the Respondent in Enter main case number here Enter name or party type here in Enter main case number here.	If the application does not involve another party, you do not need to complete question B. If the application is against a person who is not an existing party to the proceedings, you must provide the details of the person in Section B of the Originating Application: Generic Sections (Form 53B).
Part	A		
1.	I am aj □ The	oplying for: order of court dated [Enter date here] is to be varied out in this summons.	
		(a) Paragraph(s) [Enter paragraph no. here] is replaced	<i>Options (a), (b) and (c) are provided for use as required</i>

State new order(s) here.

as follows:

□ (b) A new clause is inserted as paragraph [Enter paragraph no. here] after paragraph [Enter paragraph no. here] as follows:

State new order(s) here.

Options (a), (b) and (c) are provided for use as required in your application. You may use the same option more than once, or use your own wordings (option (d)) if these options are not suitable.

 \Box (c) Paragraph(s) [Enter paragraph no. here] is / are to be rescinded.

 \Box (d) [State the changes]

Part B: Costs

3. Costs of this application

- \Box Costs in the cause.
- \Box No orders as to costs.
- \Box Each party to bear own costs.
- □ Costs to be paid by Enter name or party type here
- Costs to be reserved to Enter event here.

\Box Others:

Enter details here.

Costs in the cause means the costs of this application will be decided at and will depend on the outcome of the main proceedings. This option is applicable only if you are filing a summons.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

The reasons for this Originating Application / Summons are stated in the supporting affidavit.

¹If this is filed as a summons, the information below will be generated:

If you wish to contest the application, you must:

- a) file an affidavit in reply if you also wish to introduce evidence in this application within 14 days of being served this application and supporting affidavit(s); and
- b) attend at the Family Justice Courts on the date and time shown above (if any). If you do not attend personally or by lawyer, the Court may make appropriate orders.

¹ Not applicable if the summons/application is without notice, i.e. there is no responding party.

Affidavit in support of Originating Application Summons for Children Orders (Variation / Rescission)

This Form is used to provide evidence in support of your Originating Application / Summons for Children orders (Variation / Rescission) (Form 55B).

Please delete the inapplicable references / sentences / sections when using this Form, and renumber the paragraphs if necessary. For example, if your application does not include variation or rescission of child(ren) maintenance, you may delete Section 7.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

The Form for completion is from the next page onwards. This cover note need not be included in the filed affidavit.

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]²

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application No. FC/OA [number]/[year]

Sub Case No. [number]/[year]³

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

AFFIDAVIT IN SUPPORT OF THE APPLICATION FOR CHILDREN ORDERS (VARIATION / RESCISSION)

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/ Passport h
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

- 1. I am the [enter party type i.e. Applicant or Respondent / witness for [party type] here] in [enter main case number here].⁴
- 2. This affidavit is in support of the Originating Application / summons.
- 3. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.
- 4. I am seeking orders stated in the \Box Originating Application \Box summons for the following child(ren)⁵:

Name	ID Number	Date of Birth	
Enter name here	Enter ID no. here.	Enter date of birth here.	
Enter name here	Enter ID no. here.	Enter date of birth here.	

² Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

³ To insert sub-case details if relevant.

⁴ You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

⁵ Add additional rows if required.

Section 2: Applicant's Relationship with the Child(ren)

Select an applicable option from either the orange, green or yellow rows / the 3 options numbered as paragraph 5 and delete the inapplicable options.

5. I am the \Box parent \Box court-appointed guardian of the child(ren).

5. (a) The details of death of the parent(s) of the child(ren) are as follows:

	□ Father	□ Mother
Name	Enter name here	Enter name here
Date of death	Enter date here.	Enter date here.

(b) *I am the guardian appointed by the deceased parent and the child(ren) has a surviving parent. The deceased parent appointed me through [state the document of appointment]. Only 1 of the parents is deceased. I would like to explain the reason why the surviving parent is not filing this application:

Enter details here.

- (c) *There are no surviving parents of the child(ren) and no guardian has been appointed by the child(ren)'s deceased parent(s).
- (d) *I am the guardian appointed by the deceased parent(s) and the child(ren) has no surviving parents. The deceased parent(s) appointed me through [state the document of appointment].
- (e) This is my relationship with the child(ren):

Explain if you are related to the child(ren) by blood or marriage. Enter details here.

- 5. (a) This is how I am related to the child(ren):
 - (b) *This is not an application for return of child to the lawful guardian, nor to remove or substitute a guardian. These are the special circumstances which will allow me to make this application:

Under the law, you may not have the required connection with the child(ren) to make this application. Explain the special circumstances which will allow you to make this application.

Enter details here.

(c) *I am applying for return of child to the lawful guardian. I am considered the lawful guardian for these reasons:

Enter details here.

(d) *I am applying to remove or substitute a guardian. This is my relationship with the children:

Enter details here.

Section 3: Connection with Syariah Court Divorce

Select an applicable option from either the orange or green rows / the 2 options numbered as paragraph 6.

- 6. The child(ren) is/are not born of a marriage under Islamic law.
- 6. (a) The child(ren) is/are born of a marriage under Islamic law.
 - (b) □ There are no ongoing or concluded divorce proceedings between the parties in Syariah Court.
 - (c) □ There are ongoing or concluded divorce proceedings between the parties in Syariah Court⁶.

Section 4: Details of Child(ren) and Care Arrangements

- 7. The details of the children are in <u>Annex A</u>.
- 8. The living arrangements below apply to all children / child: Enter name here.

Prese	nt arrangements	
(a)	State who is the child(ren) living with presently:	Enter details here.
(b)	Provide brief details of this arrangement:	Enter details here.
(c)	State all other adults who are living with the child(ren) and how they are related to the child(ren):	Enter details here.
(d)	State when this arrangement started:	Enter details here.
(e)	Is this arrangement due to an existing court order? State the date of the court order.	Enter details here. Date of Court Order: Enter date here.
(f)	If the child(ren) are not living with either parent, state if the child(ren) have contact with the	Enter details here.

If the arrangement for each child is different, complete the table for <u>each</u> child.

⁶ If there are ongoing or concluded divorce proceedings between the parties in Syariah Court, complete the Notice of Syariah Court proceedings (Form 58) and include as an exhibit to this affidavit.

parent(s) who is not living with the child(ren):	
Provide details such as frequency and length of contact, if this is a regular arrangement.	
Provide details of the most recent contact:	Enter details here.
E.g. date, time, manner of contact	
Provide details of the financial support for the child(ren).	Enter details here.
E.g. the person(s) who maintain the child, how the person maintains the child, when did this arrangement start.	
osed future arrangements	
State who the child(ren) will live with in future:	Enter details here.
Provide brief details of this arrangement:	Enter details here.
State the contact which the child(ren) will have with the parent who is not living with the	Enter details here.
child(ren): Provide details such as frequency and length of contact.	
Provide details of the financial support for the child(ren).	Enter details here.
$E \sigma$ the person(s) who maintain	
the child, how the person maintains the child, whether the person is an undischarged bankrupt.	
	the child(ren): Provide details such as frequency and length of contact, if this is a regular arrangement. Provide details of the most recent contact: E.g. date, time, manner of contact Provide details of the financial support for the child(ren). E.g. the person(s) who maintain the child, how the person maintains the child, when did this arrangement start. Seed future arrangements State who the child(ren) will live with in future: Provide brief details of this arrangement: State the contact which the child(ren) will have with the parent who is not living with the child(ren): Provide details such as frequency and length of contact. Provide details of the financial

(m) I would like to provide additional information on the care and contact arrangements:

State if there are any significant issues relevant to care and contact arrangements for the children / this child (e.g. health issues, circumstances of either parent); and / or the reasons for the proposed future arrangements. Provide brief details to support your statement(s).

Enter details here.

Section 5: Past Variation(s)

Select an applicable option from either the orange or green rows / the 2 options numbered as paragraph 9 and delete the inapplicable option.

9. This is the first variation of the orders for the child(ren).

9. The orders for the child(ren) have been varied in the past.

Complete the table beginning with the latest variation application (if there were multiple applications). Add additional rows if required.

S/N	Case number	Applying party	Outcome (E.g. variation granted or application dismissed)	Date of order
1.	Enter case number here	Enter party type here	Enter details here	Enter date here
2.	Enter case number here	Enter party type here	Enter details here	Enter date here
3.	Enter case number here	Enter party type here	Enter details here	Enter date here

Section 6: Employment Details

Select an applicable option from either the orange, green or yellow rows / the 3 options numbered as paragraphs 10 to 12 or 13 respectively and delete the inapplicable options. Then proceed to paragraph 14.

10. I am unemployed.

- 11. I have never been employed.
- 12. The details of my lack of employment are:

Enter details here.

10. I am an employee / self-employed.

11. ^My current job details are as follows:

(a)	Name of	Enter details here.
	organisation	
(b)	Address of	Enter details here.
	organisation	
(c)	Designation (if you	Enter details here.
	are an employee)	
(d)	Nature of business	Enter details here.
	(if you are self-	
	employed)	
(e)	Nature of	□ Full-time
	employment	□ Part-time
		□ Ad-hoc/casual
(f)	State your working	Enter details here.
	hours	

^I hold more than 1 job. The details of my other job are as follows:

(a)	Name of	Enter details here.
	organisation	
(b)	Address of	Enter details here.
	organisation	
(c)	Designation (if you	Enter details here.
	are an employee)	
(d)	Nature of business	Enter details here.
	(if you are self-	
	employed)	
(e)	Nature of	□ Full-time
	employment	

		 Part-time Ad-hoc/casual
(f)	State your working	Enter details here.
	hours	

12. I provide the additional information on my employment:

Include additional information if any.

Enter details here.

10. I am unemployed.

11. My previous job details are as follows:

	-				
	(a)	Name of	Enter details here.		
		organisation			
	(b)	Address of	Enter details here.		
		organisation			
	(c)	Designation (if you	Enter details here.		
		are an employee)			
	(d)	Nature of business	Enter details here.		
		(if you are self-			
		employed)			
	(e)	Nature of	□ Full-time		
		employment	□ Part-time		
			□ Ad-hoc/casual		
	(f)	State your working	Enter details here.		
		hours			
12.	(a)	When did you stop wo	rking?		
		Enter details here.			
	(b)	Why did you stop wor	king?		
	Enter details here.				
	(c)	What is your last draw	n salary?		
		Enter details here.			

13. I provide the additional information on my lack of employment:

Include additional information if any.

Enter details here.

14. I am not a director, partner or sole proprietor of any company in Singapore or overseas. / I am a director, partner or sole proprietor of the following companies⁷:

S/N	Name of Company	Country of incorporation	I receive remuneration
			from my position
(a)	Enter details here.	Enter details here.	\Box Yes \Box No
(b)			\Box Yes \Box No
(c)			□ Yes □ No

Proceed to Section 7.

⁷ Add additional rows if required.

Section 7: Variation of maintenance: Reasons

15. □ There is a change in my income from the time when the Court Order was issued.¹
 □ There is no change in my income from the time when the Court Order was issued.²

Inco	Income					
		Previous	Current	Previous	Current	
S/N	Source of income	Provide details of the source of income, e.g. name of of employer / property / business.	Provide details of the source of income, e.g. name of of employer / property / business.	Previous income Amount per month (in SGD)	Current income Amount per month (in SGD)	
(a)	 Salary Rental Business profits Endowment / CPF payouts Financial Assistance Others: Enter details here. 	Enter details here.	Enter details here.	Gross: Enter amount here. Nett: Enter amount here.	Gross: Enter amount here. Nett: Enter amount here.	
			Monthly TOTAL	Gross: Enter amount here. Nett: Enter amount here.	Gross: Enter amount here. Nett: Enter amount here.	

¹ Complete the columns titled "Previous" and "Current" in the table.

² Complete the columns titled "Current" in the table.

16. \Box There is a change in my personal expenses from the time when the Court Order was issued.¹

 \Box There is no change in my personal expenses from the time when the Court Order was issued.²

S/No.	Items	Previous	Currrent	<u>Notes</u>
		expense (per month)	expense (per month)	If an expense is not incurred monthly,
(a)	Food	\$ Enter amount here.	\$ Enter amount here.	please state the amount as a
(b)	Transport / Fuel expenses	\$ Enter amount here.	\$ Enter amount here.	monthly average.
(c)	Utilities	\$ Enter amount here.	Senter amount here.	Eg. if the expense is \$60 every 3 months, you should state it
(d)	Telephone, Internet, Cable TV charges	\$ Enter amount here.	\$ Enter amount here.	as \$20 per month.
(e)	Medical expenses	\$ Enter amount here.	\$ Enter amount here.	
(f)	Rent	\$ Enter amount here.	\$ Enter amount here.	
(g)	Insurance premiums	\$ Enter amount here.	\$ Enter amount here.	
(h)	Payment of debts Complete question 16a in this Section.	\$ Enter amount here.	\$ Enter amount here.	
(i)	Maintenance	Senter amount here.	\$ Enter amount here.	
(j)	Tax payments	Senter amount here.	Senter amount here.	
(k)	Financial provision for: Enter name of person here. Complete question 16b in this Section.	\$ Enter amount here.	\$ Enter amount here.	Item (k) refers to the support you give to persons besides the child(ren), e.g. extended family or ex-spouse.
(1)	Enter details here.	\$ Enter amount here.	\$ Enter amount here.	
(m)	Enter details here.	Senter amount here.	\$ Enter amount here.	
(n)	Enter details here.	\$ Enter amount here.	\$ Enter amount here.	

Personal expenses³

¹ Complete the columns titled "Previous" and "Current" in the table.

² Complete the columns titled "Current" in the table.

³ Use additional rows for items not listed.

 Monthly TOTAL	1	1
	here.	here.

16a. The debts in item (h) in the Personal Expenses table are:

S/N	Name of creditor and Account number	Nature of debt / loan (eg. personal loan, credit card / credit line)	Amount outstanding (in SGD)
(a)	Enter name of creditor and account number here.	Enter nature of debt/loan here.	Enter amount here. As of: enter date
			here.
(b)	Enter name of creditor and account number here.	Enter nature of debt/loan here.	Enter amount here. As of: enter date here.
		TOTAL	\$ Enter amount here.

16b. The financial provision in item (k) in the Personal Expenses table is:

S/N	Name of person and/or your relationship with the person	How are the monies paid?	How often are the monies paid?	Amount per month (in SGD)
(a)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	 Monthly Others: Enter details here. 	Enter amount here.
(b)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	☐ Monthly ☐ Others: Enter details here.	Enter amount here.

(c)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	□ Others: Enter	Enter amount here.
		Monthly TOTALWritethisTOTAL in Item16(k) above.	Enter amount here.	

17. □ There is a change in the child(ren) expenses from the time when the Court Order was issued.⁴

 \Box There is no change in the child(ren) expenses from the time when the Court Order was issued.⁵

Name of child: Enter name of child here.		Previous expense (per month)	Current expense (per month)	<u>Notes</u> If an expense is not incurred monthly,
S/No.	Items	Amount in S	\$ (per month)	please state the amount as a
1	Food	\$ Enter amount	\$ Enter amount	monthly average.
	(including milk)	here.	here.	Eg. if the expense is
2	Transport	\$ Enter amount	\$ Enter amount	\$60 every 3 months,
		here.	here.	you should state it
3	Mobile phone charges	\$ Enter amount	\$ Enter amount	as \$20 per month.
		here.	here.	
4	Pocket money	\$ Enter amount	\$ Enter amount	
		here.	here.	
5	School fees	\$ Enter amount	\$ Enter amount	
		here.	here.	
6	Enrichment fees	\$ Enter amount	\$ Enter amount	
		here.	here.	
7	Extracurricular expenses	\$ Enter amount	\$ Enter amount	
		here.	here.	

Child(ren) expenses⁶

⁴ Complete the columns titled "Previous" and "Current" in the table.

⁵ Complete the columns titled "Current" in the table.

⁶ You must use a separate table for each child. Use additional rows for items not listed.

8	Schoolbooks, school	\$ Enter amount	\$ Enter amount	
	uniform	here.	here.	
9	Insurance premiums	\$ Enter amount	\$ Enter amount	
		here.	here.	
10	Enter details here.	\$ Enter amount	\$ Enter amount	
		here.	here.	
11		\$ Enter amount	\$ Enter amount	
		here.	here.	
	Monthly TOTAL	\$ Enter amount	\$ Enter amount	
		here.	here.	

Section 8: Reasons for the Application

18. State in detail the reasons for your application and why your application is in the best interests of the child(ren). You should state clearly the matters which show either (a) material change in circumstances since the grant of the order, or (b) that the previous court order was granted due to misrepresentation or mistake of fact.

Enter details here.	
Enter details here.	
	~

Section 9: Summary of Claim

19. I am asking that the Court grants the \Box Originating Application \Box summons.

Annex A: Details of Child(ren)

Complete Annex A for each child.

Name	Enter full name as per NRIC/Passport h	010		
	Å Å		I	
NRIC / FIN/ Passport number	Enter NRIC/ FIN/ Passport no. here.	Gender	□ Female	
_				
Date of Birth (DD/MM/YYYY)	Enter date here.	Age	Enter age here.	
Any health	Enter details here.			
condition or				
disability which				
affect the child's				
living expenses				
or care				
arrangements?				
	Court orders / Proceedings relating to	this Child		
Is the child	□ Yes □ No		▼	
protected by an existing Personal	Case number (if issued by this Court):	Enter case number here.		
Protection	Date of order:	Enter date here.		
Order?	State the brief details of the order:			
	Enter details here.			
Are there	□ Yes □ No	-		
existing Youth Court order(s) or	Case number:	Enter case number here.		
ongoing Youth	Date of order:Enter date here.		ere.	
Court	Nature of order / proceedings:Enter details here.		here.	
proceedings?	State the person against whom the order was made:			
	Enter full name as per NRIC/Passport here.			
Is there an	□ Yes □ No			
existing	Case number:	Enter case nu	umbar hara	
voluntary				
arrangement	Date of arrangement:	Enter date he		
with the Child	Expiry date of the arrangement:	Enter date he	ere.	
Protection Services under				
the Ministry of				
Social and				
Family				
Development?				
Is there an	□ Yes □ No	•		
existing court order for this	Case number (if issued by this Court):	Enter case number here.		
or der for tills	Date of order:	Enter date he	ere.	

child's	State the brief details of the order:		
maintenance?	Enter details here.		
	Country in which the order was made	Enter country here.	
	(if issued outside of Singapore):		
Is there an	\Box Yes \Box No		
existing court order for this	Case number (if issued by this Court):	Enter case number here.	
child's living and	Date of order:	Enter date here.	
contact	State the brief details of the order:		
arrangements?	Enter details here.		
	Country in which the order was made	Enter country here.	
	(if issued outside of Singapore):		
Are there other	Enter details here.		
court orders			
such as adoption			
orders or orders under the Mental			
Capacity Act			
2008?			

Section 10: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 11: Exhibit Content Page

You must attach, with your application, a copy of the documents listed in Table 11-1 (where applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 11-2.

You may wish to refer to Part 9, Rule 16 of the Family Justice (General) Rules 2024 for the consequences of not providing the Required Documents.

Table 11-1

Exhibit	Document Name /	Page
number	Reference in Affidavit to the exhibit	numbers
	(e.g. Paragraph 1 of Section 5)	
Section 2		
E1	Copy of Order of Court	Enter
		page no.
		here.
E2	Document evidencing appointment of	Enter
	guardian by deceased parent (e.g. a copy	page no.
	of parent's will or Order of Court)	here.
E3	Translated copy of document evidencing	Enter
	appointment of guardian by deceased	page no.
	parent (e.g. a copy of parent's will or	here.
	Order of Court), if not in English	
	The translation must be done by either a Court interpreter or a certified translator with proof of	
	the translator's certification.	
E4	Death certificate(s) of parent(s)	Enter
	· · · · · · · · · · · · · · · · · · ·	page no.
		here.
E5	Translated copy of death certificate(s) of	Enter
	parent(s), if not in English	page no.
		here.
	The translation must be done by either a Court	
	interpreter or a certified translator with proof of the translator's certification.	
Section 3		

Notes

Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification, eg. E1, E2, if the exhibit page starts as page 1.

E6	Completed Nation of Suprish Court	Entor
E0	Completed Notice of Syariah Court	Enter
	proceedings (Form 58)	page no.
	~ ~	here.
E7	Syariah Court commencement	Enter
	certificate (referred to in paragraph 3a of	page no.
	the Notice of Syariah Court Proceedings	here.
	Form)	
E8	Syariah Court continuation certificate	Enter
	(referred to in paragraph 3b of the Notice	page no.
	of Syariah Court Proceedings Form)	here.
E9	Consent and Syariah Court certificate of	Enter
L)	attendance (referred to in paragraph 3c	page no.
		~ ~
		here.
a	Proceedings Form)	
Section 4		
E10	Copy of child(ren)'s birth certificate(s)	Enter
		page no.
		here.
E11	Translated copy of child(ren)'s birth	Enter
	certificate(s), if not in English	page no.
		here.
	The translation must be done by either a Court	
	interpreter or a certified translator with proof of	
	the translator's certification.	
E12	Relevant Order of Court / document	Enter
	relating to child(ren), if applicable (e.g.	page no.
	Personal Protection Order, Youth Court	here.
	order, voluntary arrangement with MSF,	·
	existing order for child(ren)'s	
	maintenance, existing order for	
	child(ren)'s living and contact	
	arrangements or any other related	
	orders).	
Seatter 5		
Section 5		Ent
E13	Copy(ies) of Order of Court for past	Enter
	Viomotion(c)	page no.
	variation(s)	
		here.
Section 7		here.
Section 7 E14		
		here.
	Payslips or similar documents to show	here. Enter
	Payslips or similar documents to show evidence of income for the past 6 months	here. Enter page no.
E14	Payslips or similar documents to show evidence of income for the past 6 months Current employment contract OR similar	here. Enter page no. here. Enter
E14	Payslips or similar documents to show evidence of income for the past 6 months Current employment contract OR similar evidence showing the current terms of	here. Enter page no. here. Enter page no.
E14 E15	Payslips or similar documents to show evidence of income for the past 6 months Current employment contract OR similar evidence showing the current terms of my employment	here. Enter page no. here. Enter page no. here.
E14	Payslips or similar documents to show evidence of income for the past 6 months Current employment contract OR similar evidence showing the current terms of my employment Tax assessment notices or similar	here. Enter page no. here. Enter page no. here. Enter
E14 E15	Payslips or similar documents to show evidence of income for the past 6 months Current employment contract OR similar evidence showing the current terms of my employment	here. Enter page no. here. Enter page no. here. Enter page no.
E14 E15 E16	Payslips or similar documents to show evidence of income for the past 6 months Current employment contract OR similar evidence showing the current terms of my employment Tax assessment notices or similar documents for the past 3 years	here. Enter page no. here. Enter page no. here. Enter page no. here.
E14 E15	Payslips or similar documents to show evidence of income for the past 6 months Current employment contract OR similar evidence showing the current terms of my employment Tax assessment notices or similar documents for the past 3 years Updated ACRA search results or similar	here. Enter page no. here. Enter page no. here. Enter page no.
E14 E15 E16	Payslips or similar documents to show evidence of income for the past 6 months Current employment contract OR similar evidence showing the current terms of my employment Tax assessment notices or similar documents for the past 3 years	here. Enter page no. here. Enter page no. here. Enter page no. here.

E18Current tenancy agreement or similar evidence showing the rental I receiveEnter page no. here.E19Updated search results on my bankruptcy status (if the filing party is an undischarged bankrupt)Enter page no. here.E20Documents to prove change in my monthly expensesEnter page no. here.E21Evidence of debt(s) owedEnter page no. here.E22Evidence on financial provision for dependentsEnter page no. here.E23Documents to prove the change child(ren)'s monthly expensesEnter page no. here.E24Enter details of paragraph/section in which the exhibit relates to here.Enter page no. here.E25Enter details of paragraph/section in which the exhibit relates to here.Enter page no. here.E26Enter details of paragraph/section in which the exhibit relates to here.Enter page no. here.E26Enter details of paragraph/section in which the exhibit relates to here.Enter page no. here.E27Enter details of paragraph/section in which the exhibit relates to here.Enter page no. here.E26Enter details of paragraph/section in which the exhibit relates to here.Enter page no. here.E27Enter details of paragraph/section in which the exhibit relates to here.Enter page no. here.E27Enter details of paragraph/section in which the exhibit relates to here.Enter page no. here.E28Enter details of paragraph/section in which the exhibit relates to here.Enter page n				
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Table 11-2If any of the Required Document(s) listed in Table 11-1 is not provided, state your reasons below.

State the name of Required Document <u>not</u> provided	 (c) State the reasons for lack of document (d) If alternative document is provided instead, state the alternative document.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the Family Justice (General) Rules 2024 to be placed between each distinct exhibit.

56A.

E-FORM

P.5, r.15 FJ(G)R 2024

Summons for Spouse Child(ren) Maintenance (New orders only)

- 1. This Form is only used if you have court proceedings in the Family Justice Courts relating to the same spouse / child(ren) for any of these matters:
 - (a) Divorce;
 - (b) Nullity;
 - (c) Judicial separation;
 - (d) Financial relief after foreign divorce.
- 2. This Form is used to seek the following orders:
 (a) interim maintenance for spouse
 (b) interim maintenance for child(ren) (*without seeking custody, care and control, access orders*).
 (c) combination of (a) and (b)
- 3. Do <u>NOT</u> use this Form in the following situations:

If yo	u are applying for:	Use instead:
(a)	Maintenance order(s) but do not have proceedings in	
	the Family Justice Courts for:	
	 Divorce; 	
	 Nullity; 	
	 Judicial Separation; or 	Maintenance Complaint
	 Financial relief after foreign divorce. 	Form (Form 23A)
(b)	Variation, setting aside, rescission or revocation of	
	maintenance order(s) with the prefix "MO".	

This form contains Notes to help you in the completion of the form. Please note that the Notes are \underline{NOT} to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form, when submitted to the Court as Summons, will be generated in accordance with the layout of the generated Summons (Form 67).

Section 1: My Application

The Parties

A. I am

- □ the Applicant in Enter main case number here.
- □ the Respondent in Enter main case number here.
- Enter name or party type here in Enter main case number here.

B. This summons is filed against

- \Box the Applicant
- the Respondent
- Enter name or party type here.

If you are filing this application as a summons, refer to the main case for your party type.

Part A

To complete this Part, some commonly used orders (pre-populated orders) are provided for your selection. Select these orders ONLY if these are completely in line with your claim. If you select the pre-populated orders, the prayers will be auto-generated for your consideration. You may edit prior to submission to the Court.

If the pre-populated orders are not suitable, you may state your prayers in the free-text boxes. You may refer to the Family Orders Guide for other types of orders.

New orders you are seeking in this application:

Pre-populated order(s)

1a. \Box Monthly maintenance

Which party is to pay maintenance?	Which party is the maintenance for?	Monthly amount to be paid
ApplicantRespondent	ApplicantRespondent	Enter amount here.

1st payment date: Enter date here.

Recurring payment date: Enter date here.

1b. \Box Payment to the party's bank account

Whose bank account?	Which bank?	Account number
ApplicantRespondent	Enter name of bank here.	Enter bank account number here.

1c. \Box There shall be no maintenance for the \Box Applicant \Box Respondent.

1d. \Box *Other Order(s)*

Enter your own orders below.

Enter orders here.	

Use these references to prepare the orders: I = ApplicantMy spouse = Respondent Eg. The order should read: There shall be no maintenance for the Respondent (instead of "my spouse").

2. Dial Maintenance for Child(ren)

<u>Pre-populated order(s)</u>

2a. \Box Monthly maintenance

Which parent is to pay maintenance?	Which child(ren) is the maintenance for?	Monthly amount to be paid
 Applicant Respondent 	□ Each child□ The child□ The children	Enter amount here.

1st payment date: Enter date here. Recurring payment date: Enter date here.

2b. \Box Payment to the party's bank account

Whose bank account?	Which bank?	Account number
ApplicantRespondent	Enter name of bank here.	Enter bank account number here.

2c. □ Other Order(s)

Enter your own orders below.

Use these references to prepare the orders: *I* = *Applicant My spouse* = *Respondent* Eg. The order should read: The Respondent (instead of "my spouse") shall pay \$x as monthly as maintenance for the children.

Enter details here.

Part B: Others

If you are seeking any other relief(s), state them below.

3. State the relief sought here.

Part C: Costs

4. **Costs of this Summons**

- \Box Costs in the cause.
- \Box No orders as to costs.
- \Box Each party to bear own costs.

Costs in the cause means the costs of this application will be decided at and will depend on the outcome of the main proceedings.

\Box Costs to be paid by:

Enter name or party type here.

\Box Costs to be reserved to

Enter event here.

 \Box Others:

Enter details here.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

The reasons for this application are stated in the supporting affidavit.

Affidavit

Please complete <u>all</u> questions and details in Sections 1 to 7 unless otherwise stated. The relevant exhibits and supporting documents are to be included at Section 8.

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/ Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

1a. I am

the Applicant in Enter main case number here.
 the Respondent in Enter main case number here.
 Enter name or party type here in Enter main case number here.

Notes

You may refer to the Originating Application ("OA") for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the subcase number.

- 1b. This affidavit is in support of the summons.
- 1c. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.
- 1d. I am applying for: (Select your application)

□ Interim maintenance	\Box for myself as the ex-spouse / spouse	Proceed	to
	only.	Section B.	

☐ for myself and the following child(ren): Enter child(ren) name(s) here.	
☐ for the following child(ren): Enter child(ren) name(s) here.	

1e. **Child(ren) details**

Use the child(ren)'s information in □ the 1st Ancillary Affidavit filed on Enter date here by the □ Applicant □ Respondent. □ Not Applicable, Plags complete Anney A for every shild stated here

□ Not Applicable. *Please complete* <u>*Annex A for every child stated here.*</u>

Proceed to Section 2.

Section 2: Employment Details

□ Use the employment information (Section 5) in the First Ancillary Affidavit filed on Enter date here by the □ Applicant □ Respondent.

Otherwise, please complete the questions below.

- 1. I am \Box an employee \Box self-employed \Box unemployed.
- - □ I have never been employed. (*Proceed to question 4. Then give your reasons for this statement in question 5.*)

(a)	Name of	Enter details here.
	organisation	
(b)	Address of	Enter details here.
	organisation	
(c)	Designation (if you	Enter details here.
	are an employee)	
(d)	Nature of business	Enter details here.
	(if you are self-	
	employed)	
(e)	Nature of	□ Full-time
	employment	□ Part-time
		□ Ad-hoc/casual
(f)	State your working	Enter details here.
	hours	

 \Box I hold more than 1 job. The details of my other job are as follows:

(a)	Name of	Enter details here.
	organisation	
(b)	Address of	Enter details here.
	organisation	
(c)	Designation (if you	Enter details here.
	are an employee)	
(d)	Nature of business	Enter details here.
	(if you are self-	
	employed)	
(e)	Nature of	□ Full-time
	employment	□ Part-time
		□ Ad-hoc/casual
(f)	State your working	Enter details here.
	hours	

3. If you are currently unemployed, please provide the information below:

(a)	When did you stop working?				
	Enter details here.				
(b)	Why did you stop working?				
	Enter details here.				
(c)	What is your last drawn salary?				
	Enter details here.				

4. I am not a director, partner or sole proprietor of any company in Singapore or overseas.

 \Box I am a director, partner or sole proprietor of the following companies:

S/N	Name of	Country of	I receive remuneration from my position			
	Company	incorporation				
(a)	Enter details	Enter details	\Box Yes \Box No			
	here.	here.				
(b)	Enter details	Enter details	\Box Yes \Box No			
	here.	here.				
(c)	Enter details	Enter details	\Box Yes \Box No			
	here.	here.				
(Expa	(Expand the table if required.)					

5. Additional information on my employment / lack of employment:

Enter details here.

Proceed to Section 3.

Section 3: New maintenance: Income and Family Expenses

Part 1

Use the **Sources of Income** information (Section 6) in the First Ancillary Affidavit filed on Enter date here by the Applicant Respondent.

Otherwise, please complete Table 3-1 below.

1. My income is:

Tabl	<u>Table 3-1</u>							
S/N		Provide details of the source of income, e.g. name of employer / property / business.	received?	receive the monies? If you do not receive the income monthly, please state the amount as a monthly average based on the past 12 months.	Amount per month (in SGD)			
(a)	\Box Salary	Enter details here.	\square In Cash	\square Monthly	Gross: Enter amount			
	□ Rental		\Box Bank transfer	□ Others:	here.			
	□ Business profits		□ Cheque	Enter details here.	Nett: Enter amount			
	Endowment / CPF		□ Others:		here.			
	payouts		Enter details here.		nere.			
	□ Financial Assistance							
	□ Others:							
	Enter details here.							
(b)	□ Salary	Enter details here.	🗆 In Cash	□ Monthly	Gross: Enter amount			
	□ Rental		□ Bank transfer	□ Others:	here.			
	□ Business profits		□ Cheque					
			□ Others:					

 Endowment / CPF payouts Financial Assistance Others: Enter details here. 	Enter details here.	Enter details here.	Nett: Enter amount here.
	Γ	Monthly TOTAL (1)	Gross: Enter amount here. Nett: Enter amount here.

Part 2

 \Box Use the **personal expenses** information (Section 7, paragraphs 1 and 2) in the First Ancillary Affidavit filed on on Enter date here by the \Box Applicant \Box Respondent.

 \Box Use the <u>debts</u> information (Section 9, paragraph 1) in the First Ancillary Affidavit filed on on <u>Enter date here</u> by the \Box Applicant \Box Respondent.

Otherwise, please complete Table 3-2 and the questions below.

Table 3-2

2.	My personal expenses are as follows:
	(Use additional rows for items not listed.)

S/N	Items	Amount per month (in SGD)	<u>Notes</u>	
(a)	Food	Enter amount here.	If an expense is not incurred monthly,	
(b)	Transport / Fuel expenses	Enter amount here.	please state the amount	
(c)	Utilities	Enter amount here.	as a monthly average.	
(d)	Telephone, Internet, Cable TV charges	Enter amount here.	Eg. if the expense is \$60	
(e)	Medical expenses	Enter amount here.	every 3 months, you should state it as \$20	
(f)	Rent	Enter amount here.	per month.	
(g)	Insurance premiums	Enter amount here.		
(h)	Payment of debts	Enter amount here.		
	<i>Complete question 2a in this Section.</i>			
(i)	Maintenance	Enter amount here.		
(j)	Tax payments	Enter amount here.		
(k)	Financial provision for:	Enter amount here.		
	Enter name of person here.		Item (k) refers to the	
	Complete question 2b in this Section.		support you give to persons besides the	
(1)	Enter details here.	Enter amount here.	<i>child(ren), e.g.</i> <i>extended family or ex-</i>	
(m)	Enter details here.	Enter amount here.	spouse.	
(n)	Enter details here.	Enter amount here.		
(0)	Enter details here.	Enter amount here.		
(p)	Enter details here.	Enter amount here.		
	TOTAL	Enter amount here.		

2a. The debts in item (h) in table 3-2 are:

S/N	Name of creditor and Account number	Nature of debt / loan (eg. personal loan, credit card / credit line)	Amount outstanding (in SGD)
(a)	Enter name of creditor and account number here.	Enter nature of debt/loan here.	Enter amount here. As of: enter date here.
(b)	Enter name of creditor and account number here.	Enter nature of debt/loan here.	Enter amount here. As of: enter date here.
		TOTAL	\$ Enter amount here.

2b. The financial provision in item (k) in table 3-2 is:

S/N	Name of person and/or your relationship with the person	How are the monies paid?	How often are the monies paid?	Amount per month (in SGD)
(a)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	☐ Monthly ☐ Others: Enter details here.	Enter amount here.
(b)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	☐ Monthly ☐ Others: Enter details here.	Enter amount here.
(c)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 ☐ In cash to the person ☐ Bank transfer to the person 	☐ Monthly ☐ Others: Enter details here.	Enter amount here.

 □ Direct payment to relevant agency □ Others: Enter details here. 		
Monthly TOTAL	Enter amount here.	
Write this		
TOTAL in Item		
1(k) above.		

Proceed toSection 3 Part 3
Section 4if you are applying for child(ren) maintenance.if you are applying for spousal maintenance.

Part 3

 \Box Use the <u>child(ren)'s expenses</u> information (Section 7, paragraph 3) in the First Ancillary Affidavit filed on <u>Enter date here</u> by the \Box Applicant \Box Respondent.

Otherwise, please complete Table 3-3 below.

3. The monthly expenses for the child(ren) are: (Use additional rows for items not listed)

Table 3	Table 3-3								
	<u>Notes</u> If an expense is not incurred monthly, please state the amount as a monthly average. To explain an unusual expense, state the reasons in the "remarks" column.								
		Name of child:		Name of child		Name of child			
		Enter name of	child here.	Enter name of	child here.	Enter name of	child here.		
S/N	Items	Amount per month (in SGD)	Remarks	Amount per month (in SGD)	Remarks	Amount per month (in SGD)	Remarks		
1	Food (including milk)	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.		
2	Transport	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.		
3	Mobile phone charges	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.		
4	Pocket money	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.		
5	School fees	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.	\$ Enter amount here.	Enter remarks here.		

6	Enrichment fees	\$ Enter	Enter remarks here.		\$ Enter	Enter remarks here.		\$ Enter	Enter remarks
		amount here.			amount here.			amount here.	here.
7	Extracurricular	\$ Enter	Enter remarks here.		\$ Enter	Enter remarks here.		\$ Enter	Enter remarks
	expenses	amount here.			amount here.			amount here.	here.
8	Schoolbooks,	\$ Enter	Enter remarks here.		\$ Enter	Enter remarks here.		\$ Enter	Enter remarks
	school uniform	amount here.			amount here.			amount here.	here.
9	Insurance	\$ Enter	Enter remarks here.		\$ Enter	Enter remarks here.		\$ Enter	Enter remarks
	premiums	amount here.			amount here.			amount here.	here.
10	Enter details	\$ Enter	Enter remarks here.		\$ Enter	Enter remarks here.		\$ Enter	Enter remarks
	here.	amount here.			amount here.			amount here.	here.
11	Enter details	\$ Enter	Enter remarks here.		\$ Enter	Enter remarks here.		\$ Enter	Enter remarks
-	here.	amount here.		-	amount here.			amount here.	here.
SUB-TOTAL (1) \$ Enter amount here.					\$ Enter amoun	mount here.		\$ Enter amount here.	
Monthly TOTAL of (1) + (2) + (3)								A	
							(4)	\$ Enter amount here.	
Notes									
If you use more than 1 table for children's expenses, add up all (4) in each of the tables.									
J for use more man i wore for ennarier s expenses, and up an a meder of the worest									

Proceed to Section 4.

Section 4: Reason(s) for Seeking Interim Maintenance

1. Select the applicable statement in question 1a or 1b.

1a. \Box I pay for all expenses for

- \Box myself
- \Box my spouse
- $\Box \text{ the child(ren):} \qquad \text{Enter child(ren)'s name(s) here.}$

1b. \Box I pay for certain expenses for

□ myself

 \Box my spouse

 $\Box \text{ the child(ren):} \qquad \text{Enter child(ren)'s name(s) here.}$

as stated in the table 4-1 below. *Provide the details in the table below.*

Please provide the following details, if applicable. Use additional rows if required.

<u>Tabl</u>	Table 4-1				
S/N	Item (If the item is mentioned in Personal expenses (Table C-2) or Child expenses (Table C-3) you may identify the items by referring to the S/No in the relevant Table s .)	Who is this payment for? Self / Child(ren) / Spouse	Amount in S\$ (per month)		
1	Enter details here (e.g. Utilities Bills, Mortgage Loan, Child(ren)'s pocket money)	Select the applicable option.	<pre>\$ Enter amount here (e.g. S\$ 200 per month)</pre>		
2	Enter details here (e.g. Utilities Bills, Mortgage Loan, Child(ren)'s pocket money)	Select the applicable option.	<pre>\$ Enter amount here (e.g. S\$ 200 per month)</pre>		
3	Enter details here (e.g. Utilities Bills, Mortgage Loan, Child(ren)'s pocket money)	Select the applicable option.	<pre>\$ Enter amount here (e.g. S\$ 200 per month)</pre>		
4	Enter details here (e.g. Utilities Bills, Mortgage Loan, Child(ren)'s pocket money)	Select the applicable option.	<pre>\$ Enter amount here (e.g. S\$ 200 per month)</pre>		
5	Enter details here (e.g. Utilities Bills, Mortgage Loan, Child(ren)'s pocket money)	Select the applicable option.	<pre>\$ Enter amount here (e.g. S\$ 200 per month)</pre>		

2. Select the applicable statement in 2a or 2b.

- 2a. \Box The other party does not pay for any of
 - \Box his / her expenses
 - \Box my expenses
 - □ the child(ren)'s expenses: Enter child's name here.

2b. \Box The other party pays for certain expenses for

\Box me	
\Box the child(ren):	Enter child's name here.
as stated in the table 4-2 be	low. <i>Provide the details in the table below.</i>

Please provide the following details, if applicable. Use additional rows if required.

Tabl	Table 4-2				
S/N	Item (If the item is mentioned in Personal expenses (Table 3-2) or Child expenses (Table 3-3) you may identify the items by referring to the S/No in the relevant Table s .)	Who is this payment for? Self / Child(ren) / Spouse	Amount in S\$ (per month)		
1	Enter details here (e.g. Utilities Bills,	Select the	\$ Enter amount		
	Mortgage Loan, Child(ren)'s pocket	applicable	here (e.g. S\$		
	money)	option.	200 per month)		
2	Enter details here (e.g. Utilities Bills,	Select the	\$ Enter amount		
	Mortgage Loan, Child(ren)'s pocket	applicable	here (e.g. S\$		
	money)	option.	200 per month)		
3	Enter details here (e.g. Utilities Bills,	Select the	\$ Enter amount		
	Mortgage Loan, Child(ren)'s pocket	applicable	here (e.g. S\$		
	money)	option.	200 per month)		
4	Enter details here (e.g. Utilities Bills,	Select the	\$ Enter amount		
	Mortgage Loan, Child(ren)'s pocket	applicable	here (e.g. S\$		
	money)	option.	200 per month)		
5	Enter details here (e.g. Utilities Bills,	Select the	\$ Enter amount		
	Mortgage Loan, Child(ren)'s pocket	applicable	here (e.g. S\$		
	money)	option.	200 per month)		

Proceed to Section 5.

Section 5: Reasons for the Application

Complete <u>all</u> questions (except for 1C) in this Section. Complete 1C only if you are applying for maintenance as an incapacitated husband.

A. These are my available financial resources.

(Use additional rows if required)

Tabl	Table 5-1				
S/N	Financial resource / Asset (Eg. bank account)	Value (SGD)	Is the resource used to pay for your personal expenses / child(ren)'s expenses? If no, explain the reasons.		
1.	Enter details here.	\$ Enter amount here.	Enter details here.		
2.	Enter details here.	\$ Enter amount here.	Enter details here.		

B. If there are circumstances which will significantly affect your income or contribution to your spouse or your child(ren), please state briefly your circumstances, the history or reasons, and how it affects your income or contribution.

Notes: For easy reference, number each paragraph and sub-points clearly. Use headers or titles to identify different issues.



C. If you are an incapacitated husband applying for maintenance, answer the next question. Otherwise, proceed to questions 2 and 3.

□ Only for incapacitated husband applying for maintenance.

(a)	Nature of incapacity	Enter details here.
(b)	Is the incapacity permanent or temporary?	Select the applicable option.
(c)	Date of most recent medical report(s) with details of incapacity	Enter a date here.
(d)	Name of doctor	Enter name of doctor here.
(e)	Is the doctor licensed to practise in Singapore?	 □ Yes. □ No. If no, state the country: <u>Enter country here.</u>

Proceed to question 2.

2. Standard of living

If you would like the Court to consider the standard of living enjoyed by the family during the marriage, provide brief details below:

Notes: For easy reference, number each paragraph and sub-points clearly. Use headers or titles to identify different issues.

En	ter details here.

3. Reasons for this application

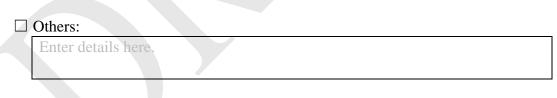
For all applications, state in detail the reasons for your application.

(*Notes:* For easy reference, number each paragraph and sub-points clearly. Use headers or titles to identify different issues.)



Section 6: Summary of Claim

1. \Box I am asking that the Court grants this summons.



Annex A: Child(ren) Details

Complete Table A-1 for the child(ren) whom you are applying for maintenance for. Please complete the Table for <u>each</u> child.

Name	Enter full name as per NRIC/Passport h	ere.		
NRIC / FIN / Passport number	Enter NRIC/ FIN/ Passport no. here.	Gender	□ Female □ Male	
Date of Birth (DD/MM/YYYY)	Enter date here.	Age	Enter age here.	
Any health condition which will affect the child's living expenses or care arrangements?	Enter details here.			
	Court orders / Proceedings relating to	this Child		
Is the child	□ Yes □ No			
protected by an	Case number (if issued by this Court):	Enter case nu	mber here.	
existing Personal Protection	Date of order:	Enter date he	re.	
Order?	State the brief details of the order:			
	Enter details here.			
Are there	□ Yes □ No			
existing Youth Court order(s) or	Case number:	Enter case number here.		
ongoing Youth	Date of order:	Enter date here.		
Court	Nature of order / proceedings: Enter details here.			
proceedings?	State the person against whom the order			
	Enter full name as per NRIC/Passport here.			
Is there an	□ Yes □ No			
existing voluntary	Case number:	Enter case nu		
arrangement	Date of arrangement:	Enter date he		
with the Child	Expiry date of the arrangement:	Enter date he	re.	
Protection Services under				
the Ministry of				
Social and				
Family				
Development? Is there an	□ Yes □ No			
existing court	Case number (if issued by this Court):	Enter case nu	mber here	
order for this	Date of order:	Enter date he		
child's	State the brief details of the order:		1	
maintenance?	State the orier details of the order.			

	Enter details here.	
	Country in which the order was made (if issued outside of Singapore):	Enter country here.
Is there an	□ Yes □ No	
existing court	Case number (if issued by this Court):	Enter case number here.
order for this child's living and	Date of order:	Enter date here.
contact	State the brief details of the order:	
arrangements?	Enter details here.	
	Country in which the order was made	Enter country here.
	(if issued outside of Singapore):	
Are there other	Enter details here.	
court orders		
such as adoption orders or orders		
under the Mental		
Capacity Act		
2008?		
20001		

Section 7: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 8: Exhibit Content Page

You must attach, with your application, a copy of the documents in Table 8-1 (if applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 8-2.

You may wish to refer to Part 9, Rule 16 of the Family Justice (General) Rules 2024 for the consequences of not providing the Required Documents.

Table 8-1

T-1 '1 '4	Defense in Francia de 1919	D
Exhibit	Reference in Form to the exhibit (e.g. Paragraph 1 of Section 5)	Page numbers
number	(e.g. 1 uragraph 1 of Section 5)	numbers
Section 3		
E1	Payslips or similar documents to	Enter
	show evidence of income for the	page no.
	past 6 months	
E2	Current employment contract OR	Enter
	similar evidence showing the	page no.
	current terms of my employment	
E3	Tax assessment notices or similar	Enter
	documents for the past 3 years	page no.
E4	Updated ACRA search results or	Enter
	similar documents to show	page no.
F 5	ownership of my businesses	Entet
E5	Current tenancy agreement or	Enter
	similar evidence showing the rental I receive	page no.
E6		Enter
E0	Updated search results on my bankruptcy status (if the filing party	page no.
	is an undischarged bankrupt)	page no.
E7	Documents to prove my monthly	Enter
	expenses	page no.
E8	Evidence of debt(s) owed	Enter
20		page no.
E9	Evidence on financial provision for	Enter
	dependents	page no.
E10	Documents to prove the child(ren)'s	Enter
	monthly expenses	page no.
E11	Evidence that I have supported my	Enter
	dependents	page no.
E12	My medical report OR evidence of	Enter
	my incapacity to work	page no.
Section 4		
E13	Documents to prove payment of	Enter
	stated expenses	page no.
Section 5		
E14	Copies of bank statements for the	Enter
	past 3 months	page no.
E15	Medical report certifying details of	Enter
	incapacity (for incapacitated	page no.
	husband)	
All Other Ev	idence to Support Application	
E16	Enter details of paragraph/section in	Enter
	which the exhibit relates to.	page no.

Notes

Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification, eg. E1, E2, if the exhibit page starts as page 1

If any of the documents listed in Table H-1 is not provided, complete <u>Table H-2 in this</u> <u>Section</u>.

E17	Enter details of paragraph/section in	Enter
	which the exhibit relates to.	page no.
E18	Enter details of paragraph/section in	Enter
	which the exhibit relates to.	page no.
E19	Enter details of paragraph/section in	Enter
	which the exhibit relates to.	page no.
E20	Enter details of paragraph/section in	Enter
	which the exhibit relates to.	page no.

(Expand the table if required)

Table 8-2

If any of the Required Document(s) listed in Table 8-1 is not provided, state your reasons below.

State the name of the Required		
Document not provided	(d) If alternative document is provided instead, state the alternative document.	
Enter details here.	Enter details here.	
Enter details here.	Enter details here.	
Enter details here.	Enter details here.	
Enter details here.	Enter details here.	
Enter details here.		

(Expand the table if required)

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the Family Justice (General) Rules 2024 to be placed between each distinct exhibit.

56B.

P.2, r.19, P.5, r.3, 15 FJ(G)R 2024

PDF UPLOAD

□ Originating Application □ Summons for □ Spouse □ Child(ren) Maintenance (Variation / Rescission)

- This Form is used to apply for variation or rescission of maintenance orders made in the Family Justice Courts:

 (a) with the prefix "OAD", "OADT", "OADV", "OADTV", "D", "DT";
 (b) after a foreign divorce (pursuant to section 121B Women's Charter 1961).
- The application is to be made by summons if the order (whether interim or final) to be varied or rescinded has the prefix "OAD", "OADT", "OADV", "OADTV", "OAFV".

In all other situations, the application is to be made by Originating Application.

3. Do <u>NOT</u> use this Form in the following situations:

If you are applying for:	Use instead:
Variation, setting aside, rescission or revocation of maintenance order(s) with the prefix "MO" or "EMO".	Maintenance Complaint Form (Form 23A)
Variation, rescission of maintenance order(s) made in Family	Originating Application /
Justice Courts with the prefix "OAG" or "OAGV"	Summons for Children
	Orders (Variation /
	Rescission) (Form 55B)

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form, when submitted to the Court as an Originating Application, will be generated in accordance with the layout of the generated Originating Application (Form 53). If the form is submitted to the Court as Summons, will be generated in accordance with the layout of the generated Summons (Form 67).

This Notice serves as a reminder to the Applicant and does not appear as part of the issued Originating Application ("OA").

IMPORTANT: Duty to consider amicable resolution

Pursuant to the Family Justice (General) Rules 2024 ("FJ(G)R 2024"), you are required to consider amicable resolution of the dispute before and after commencing Court proceedings. This means that you should either:

- e. explore alternative ways of settling the dispute without resorting to legal action; or
- f. make an offer to the other party to settle the dispute.

For more information on your obligations, please refer to the Information Sheet on Amicable Dispute Resolution and Part 4 of the FJ(G)R 2024.

Section 1: My Application

If you are filling this Form as a **Summons**, proceed to Question A.

If you are filling this Form as an **Originating Application**, proceed to Question B.

The	Parties	
А.	I am the Applicant in Enter main case number here. the Respondent in Enter main case number here. Enter name or party type here in Enter main case number here. here.	If you are filing this application as a summons, refer to the main case for your party type. If you are filing as an Originating Application, select "Applicant." You must also complete the Originating Application: Generic Sections (Form 53B).
В.	This □ Originating Application □ summons is filed against the Applicant the Respondent Enter name or party type here.	If the application does not involve another party, you do not need to complete question B. If the application is against a person who is not an existing party to the proceedings, you must provide the details of the person in Section B of the Originating Application: Generic Sections (Form 53B).
Part	Α	
1.	I am applying for:	
	 as set out in this summons. (a) Paragraph(s) [Enter paragraph no. here] is replaced as follows: State new order(s) here. 	Options (a), (b) and (c) are provided for use as required in your application. You may use the same option more than once, or use your own

□ (b) A new clause is inserted as paragraph [Enter paragraph no. here] after paragraph [Enter paragraph no. here] as follows:

than once, or use your own wordings (option (d)) if these options are not suitable.

State new order(s) here.

 \Box (c) Paragraph(s) [Enter paragraph no. here] is / are to be rescinded.

 \Box (d) [State the changes]

Part B: Costs

3. **Costs of this application**

- \Box Costs in the cause.
- \Box No orders as to costs.
- \Box Each party to bear own costs.
- Costs to be paid by: Enter name or party type here
- Costs to be reserved to Enter event here.

 \Box Others:

Enter details here.

Costs in the cause means the costs of this application will be decided at and will depend on the outcome of the main proceedings. This option is applicable only if you are filing a summons.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

The reasons for this Originating Application / Summons are stated in the supporting affidavit.

¹If this is filed as a summons, the information below will be generated:

If you wish to contest the application, you must:

- c) file an affidavit in reply if you also wish to introduce evidence in this application within 14 days of being served this application and supporting affidavit(s); and
- d) attend at the Family Justice Courts on the date and time shown above (if any). If you do not attend personally or by lawyer, the Court may make appropriate orders.

¹ Not applicable if the summons/application is without notice, i.e. there is no responding party.

Affidavit in support of Originating Application Summons for Maintenance (Variation / Rescission)

This Form is used to provide evidence in support of your Originating Application / Summons for Maintenance (Variation / Rescission) (Form 56B).

Please delete the inapplicable references / sentences when using this Form, and renumber the paragraphs if necessary.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

The Form for completion is from the next page onwards. This cover note need not be included in the filed affidavit.

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]²

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application No. FC/OA [number]/[year]

Sub Case No. [number]/[year]³

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

AFFIDAVIT IN SUPPORT OF THE APPLICATION FOR MAINTENANCE (VARIATION / RESCISSION)

Section 1: Introduction

Enter full name as per NRIC/ Passport here.
Enter NRIC/ FIN/ Passport no. here.
Enter address here.
Enter occupation here.

- 5. I am the [enter party type i.e. Applicant or Respondent / witness for [party type] here] in [enter main case number here].⁴
- 6. This affidavit is in support of the Originating Application / summons.
- 7. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.
- 8. I am applying for □ variation □ rescission of the □ interim □ final maintenance order ("Court Order")
 □ for myself as the spouse / ex-spouse only.
 □ for myself and the following child(ren): Enter name(s) of child(ren) here.
- 5. The details of the children are in **Annex A**.

² Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

³ To insert sub-case details if relevant.

⁴ You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

6. The details of the \Box variation \Box rescission I am seeking are set out here⁵:

S/N	Recipient of the maintenance	Current maintenance	New maintenance sought
1	□ Spouse / Ex-spouse	\$ Enter amount	\$ Enter amount
		here.	here.
	\Box Child(ren): Enter child(ren)		
	name(s) here.	\Box per month	\Box per month
		□per year	□per year
		□Others: Please	Others: Please
		specify frequency	specify frequency

Section 2: Employment Details

Select an applicable option from either the orange, green or yellow rows / the 3 options numbered as paragraphs 7 to 9 or 10 respectively and delete the inapplicable options. Then proceed to paragraph 11.

7. I am unemployed.

- 8. I have never been employed.
- 9. The details of my lack of employment are:

- 7. I am an employee / self-employed.
- 8. ^My current job details are as follows:

(a)	Name of	Enter details here.
	organisation	
(b)	Address of	Enter details here.
	organisation	
(c)	Designation (if you	Enter details here.
	are an employee)	

⁵ Use additional rows in the table if required.

Γ	(d)	Nature of business	Enter details here.
		(if you are self-	
		employed)	
Ī	(e)	Nature of	□ Full-time
		employment	□ Part-time
			□ Ad-hoc/casual
	(f)	State your working	Enter details here.
		hours	

^I hold more than 1 job. The details of my other job are as follows:

(a)	Name of	Enter details here.
	organisation	
(b)	Address of	Enter details here.
	organisation	
(c)	Designation (if you	Enter details here.
	are an employee)	
(d)	Nature of business	Enter details here.
	(if you are self-	
	employed)	
(e)	Nature of	□ Full-time
	employment	□ Part-time
		□ Ad-hoc/casual
(f)	State your working	Enter details here.
	hours	

9. I provide the additional information on my employment:

Include additional information if any.

7. I am unemployed.

9.

8. My previous job details are as follows:

(a)	Name of	Enter details here.	
	organisation		
(b)	Address of	Enter details here.	
	organisation		
(c)	Designation (if you	Enter details here.	
	are an employee)		
(d)	Nature of business	Enter details here.	
	(if you are self-		
	employed)		
(e)	Nature of	□ Full-time	
	employment	□ Part-time	
		□ Ad-hoc/casual	
(f)	State your working	Enter details here.	
	hours		
(a)	When did you stop working?		
	Enter details here.		
(b)	Why did you stop wor	king?	
	Enter details here.		
(c)	What is your last draw	/n salary?	

10. I provide the additional information on my lack of employment:

Include additional information if any.

11. I am not a director, partner or sole proprietor of any company in Singapore or overseas. / I am a director, partner or sole proprietor of the following companies⁶:

S/N	Name of Company	Country of incorporation	I receive remuneration from my position
(a)	Enter details here.	Enter details here.	\Box Yes \Box No
(b)			\Box Yes \Box No
(c)			\Box Yes \Box No

Proceed to Section 3.

⁶ Add additional rows if required.

Section 3: Variation of maintenance: Reasons

12. □ There is a change in my income from the time when the Court Order was issued.¹
 □ There is no change in my income from the time when the Court Order was issued.²

Inco	Income				
		Previous	Current	Previous	Current
S/N	Source of income	Provide details of the source of income, e.g. name of of employer / property / business.	Provide details of the source of income, e.g. name of of employer / property / business.	Previous income Amount per month (in SGD)	Current income Amount per month (in SGD)
(a)	 Salary Rental Business profits Endowment / CPF payouts Financial Assistance Others: Enter details here. 	Enter details here.	Enter details here.	Gross: Enter amount here. Nett: Enter amount here.	Gross: Enter amount here. Nett: Enter amount here.
	Monthly TOTAL Gross: Enter amount here. Gross: Enter amount here. Nett: Enter amount here. Nett: Enter amount here. Nett: Enter amount here.				

¹ Complete the columns titled "Previous" and "Current" in the table.

² Complete the columns titled "Current" in the table.

13. \Box There is a change in my personal expenses from the time when the Court Order was issued.¹

 \Box There is no change in my personal expenses from the time when the Court Order was issued.²

S/No.	Items	Previous	Currrent	<u>Notes</u>
		expense (per month)	expense (per month)	If an expense is not incurred monthly,
(a)	Food	\$ Enter amount here.	\$ Enter amount here.	please state the amount as a
(b)	Transport / Fuel expenses	Senter amount here.	Senter amount here.	monthly average.
(c)	Utilities	\$ Enter amount here.	\$ Enter amount here.	Eg. if the expense is \$60 every 3 months, you should state it
(d)	Telephone, Internet, Cable TV charges	\$ Enter amount here.	\$ Enter amount here.	as \$20 per month.
(e)	Medical expenses	\$ Enter amount here.	\$ Enter amount here.	
(f)	Rent	\$ Enter amount here.	\$ Enter amount here.	
(g)	Insurance premiums	\$ Enter amount here.	Senter amount here.	
(h)	Payment of debts Complete question 13a in this Section.	Senter amount here.	\$ Enter amount here.	
(i)	Maintenance	\$ Enter amount here.	\$ Enter amount here.	
(j)	Tax payments	Senter amount here.	Senter amount here.	
(k)	Financial provision for: Enter name of person here. Complete question 13b in this Section.	\$ Enter amount here.	\$ Enter amount here.	Item (k) refers to the support you give to persons besides the child(ren), e.g. extended family or ex-spouse.
(1)	Enter details here.	\$ Enter amount here.	\$ Enter amount here.	
(m)	Enter details here.	Senter amount here.	\$ Enter amount here.	
(n)	Enter details here.	Senter amount here.	\$ Enter amount here.	

Personal expenses³

¹ Complete the columns titled "Previous" and "Current" in the table.

² Complete the columns titled "Current" in the table.

³ Use additional rows for items not listed.

Monthly TOTAL	1	1
	here.	here.

13a. The debts in item (h) in the Personal Expenses table are:

S/N	Name of creditor and Account number	Nature of debt / loan (eg. personal loan, credit card / credit line)	Amount outstanding (in SGD)
(a)	Enter name of creditor and account number here.	Enter nature of debt/loan here.	Enter amount here. As of: enter date here.
(b)	Enter name of creditor and account number here.	Enter nature of debt/loan here.	Enter amount here. As of: enter date here.
		TOTAL	\$ Enter amount here.

13b. The financial provision in item (k) in the Personal Expenses table is:

S/N	Name of person and/or your relationship with the person	How are the monies paid?	How often are the monies paid?	Amount per month (in SGD)
(a)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	☐ Monthly ☐ Others: Enter details here.	Enter amount here.
(b)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: 	☐ Monthly ☐ Others: Enter details here.	Enter amount here.

		Enter details here.		
(c)	Enter full name as per NRIC/Passport and/or your relationship with the person here.	 In cash to the person Bank transfer to the person Direct payment to relevant agency Others: Enter details here. 	☐ Monthly ☐ Others: Enter details here.	Enter amount here.
		Monthly TOTALWritethisTOTALinItem13(k) above.	Enter amount here.	

14. □ There is a change in the children expenses from the time when the Court Order was issued.⁴

 \Box There is no change in the children expenses from the time when the Court Order was issued.⁵

Child(ren) expenses⁶

Name of	child:	Previous expense	Current expense	<u>Notes</u>
Enter name of child here.		(per month)	(per month)	If an expense is not incurred monthly,
S/No.	Items	Amount in S	\$ (per month)	please state the
				amount as a
1	Food	\$ Enter amount	\$ Enter amount	monthly average.
	(including milk)	here.	here.	Es if the sum man is
2	Transport	\$ Enter amount	\$ Enter amount	<i>Eg. if the expense is</i> \$60 <i>every 3 months,</i>
	-	here.	here.	you should state it
3	Mobile phone charges	\$ Enter amount	\$ Enter amount	as \$20 per month.
		here.	here.	
4	Pocket money	\$ Enter amount	\$ Enter amount	
	-	here.	here.	
5	School fees	\$ Enter amount	\$ Enter amount	
		here.	here.	
6	Enrichment fees	\$ Enter amount	\$ Enter amount	
		here.	here.	

⁴ Complete the columns titled "Previous" and "Current" in the table.

⁵ Complete the columns titled "Current" in the table.

⁶ You must use a separate table for each child. Use additional rows for items not listed.

7	Extracurricular expenses	\$ Enter amount	\$ Enter amount	
		here.	here.	
8	Schoolbooks, school	\$ Enter amount	\$ Enter amount	
	uniform	here.	here.	
9	Insurance premiums	\$ Enter amount	\$ Enter amount	
		here.	here.	
10	Enter details here.	\$ Enter amount	\$ Enter amount	
		here.	here.	
11	Enter details here.	\$ Enter amount	\$ Enter amount	
		here.	here.	
	Monthly TOTAL	\$ Enter amount	\$ Enter amount	
		here.	here.	

Section 4: Reasons for the Application

15. Circumstances which affect income or ability to maintain self, spouse or child(ren)

A. These are my available financial resources.⁷

S/N	Financial resource / Asset (Eg. bank account)	Value (SGD)	Is the resource used to pay for your personal expenses / child(ren)'s expenses? If no, explain the reasons.
1.	Enter details here.	\$ Enter amount here.	Enter details here.
2.	Enter details here.	\$ Enter amount here.	Enter details here.

B. If there are circumstances which will significantly affect your income or contribution to your spouse or your child(ren), please state briefly your circumstances, the history or reasons, and how it affects your income or contribution.

⁷ Use additional rows if required.

16. <u>Standard of living</u>

If you would like the Court to consider the standard of living enjoyed by the family during the marriage, provide brief details.

Enter details here.	

Reasons for the application

17. State the changes which had occurred since the existing order was made and how the changes will support your application.⁸

Ent	er details here.		

18. Only for incapacitated husband applying for variation of maintenance for incapacitated husband.⁹

⁸ For easy reference, number each paragraph and sub-points clearly. Use headers or titles to identify different issues.

⁹ To be included if you are an incapacitated husband applying for variation of maintenance (other than rescission).

(a)	Nature of incapacity	Enter details here.
(b)	Is the incapacity permanent or temporary?	Select the applicable option.
(c)	Date of most recent medical report(s) with details of incapacity	Enter a date here.
(d)	Name of doctor	Enter name of doctor here.
(e)	Is the doctor licensed to practise in Singapore?	 □ Yes. □ No. If no, state the country: <u>Enter country here.</u>

Section 5: Summary of Claim

19. I am asking that the Court grants the \Box Originating Application \Box summons.

Annex A: Details of Child(ren)

Complete Annex A for each child.

Name	Enter full name as per NRIC/Passport here.				
NRIC / FIN/	Enter NRIC/ FIN/ Passport no. here.	Gender	□ Female		
Passport number		Gender	\square Male		
Date of Birth	Enter date here.	Age	Enter age here.		
(DD/MM/YYYY)					
Any health	Enter details here.				
condition or disability which					
affect the child's					
living expenses					
or care					
arrangements?					
	Court orders / Proceedings relating to	this Child			
Is the child	□ Yes □ No		•		
protected by an	Case number (if issued by this Court):	Enter case nu	umber here.		
existing Personal Protection	Date of order:	Enter date here.			
Order?	State the brief details of the order:				
	Enter details here.				
Are there	□ Yes □ No	•			
existing Youth Court order(s) or	Case number:	Enter case number here.			
ongoing Youth	Date of order:	Enter date he	ere.		
Court	Nature of order / proceedings:Enter details here.				
proceedings?	State the person against whom the order was made:				
	Enter full name as per NRIC/Passport here.				
Is there an	□ Yes □ No				
existing	Case number:	Enter case nu	umber here		
voluntary	Date of arrangement:	Enter date he			
arrangement	Expiry date of the arrangement:	Enter date he			
with the Child Protection	Expiry date of the arrangement.	Litter date ite			
Services under					
the Ministry of					
Social and					
Family					
Development? Is there an	□ Yes □ No				
existing court	Case number (if issued by this Court):	Enter case m	umber here		
order for this	Date of order:	Enter case number here.			
	Date of order:	Enter date he	ere.		

child's	State the brief details of the order:				
maintenance?	Enter details here.				
	Country in which the order was made	Enter country here.			
	(if issued outside of Singapore):				
Is there an	□ Yes □ No				
existing court	Case number (if issued by this Court):	Enter case number here.			
order for this child's living and	Date of order:	Enter date here.			
contact	State the brief details of the order:				
arrangements?	Enter details here.				
	~				
	Country in which the order was made (if issued outside of Singapore):	Enter country here.			
Are there other	Enter details here.				
court orders					
such as adoption					
orders or orders under the Mental					
Capacity Act					
2008?					

Section 6: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 7: Exhibit Content Page

You must attach, with your application, a copy of the documents listed in Table 7-1 (where applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 7-2.

You may wish to refer to Part 9, Rule 16 of the Family Justice (General) Rules 2024 for the consequences of not providing the Required Documents.

Table 7-1

Exhibit number	Document Name / Reference in Affidavit to the exhibit (e.g. Paragraph 1 of Section 5)	Page numbers
Section 2		
E1	Payslips or similar documents to show	Enter
	evidence of income for the past 6 months	page no.
		here.
E2	Current employment contract OR similar	Enter
	evidence showing the current terms of	page no.
	my employment	here.
E3	Tax assessment notices or similar	Enter
	documents for the past 3 years	page no.
		here.
E4	Updated ACRA search results or similar	Enter
	documents to show ownership of my	page no.
	businesses	here.
E5	Current tenancy agreement or similar	Enter
	evidence showing the rental I receive	page no.
		here.
E6	Updated search results on my	Enter
	bankruptcy status (if the filing party is an	page no.
	undischarged bankrupt)	here.
Section 3		
E7	Documents to prove my monthly	Enter
	expenses	page no.
		here.

Notes

Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification, eg. E1, E2, if the exhibit page starts as page 1.

E8	Evidence of debt(s) owed	Enter	1
Lo	Evidence of debi(s) owed	page no.	
		here.	
E9	Evidence on financial provision for	Enter	
L9	dependents	page no.	
	dependents	here.	
E10	Documents to prove the child(ren)'s	Enter	
LIU	monthly expenses		
	montiny expenses	page no. here.	
E11	Evidence that I have supported my	Enter	
LII	dependents	page no.	
	dependents	here.	
E12	My medical report OR evidence of my	Enter	
LIZ	incapacity to work		
	incapacity to work	page no. here.	
E13	Documents to prove neument of stated	Enter	
E13	Documents to prove payment of stated		
	expenses	page no.	
E14	Copy of Court Order(s) with	here. Enter	
E14	1.		
	maintenance order to vary	page no.	
E15	Decuments to prove shanes in income	here.	
EIJ	Documents to prove change in income	Enter	
		page no. here.	
E16	Decuments to prove change in personal	Enter	
E10	Documents to prove change in personal		
	expenses	page no. here.	
E17	Decuments to prove change in child(ren)		
E1/	Documents to prove change in child(ren)	Enter	
	expenses	page no. here.	
E18	Copies of bank statements for the past 3	Enter	
LIO	months		
	montifis	page no. here.	
Section 5		nere.	
E19	Medical report certifying details of	Enter	
E19	incapacity (for incapacitated husband)		
	incapacity (for incapacitated indoand)	page no. here.	
E20	Enter details of perpenant/paction in		
E20	Enter details of paragraph/section in which the exhibit relates to here.	Enter	
	which the exhibit relates to here.	page no.	
E21	Enter details of personal/section in	here.	
E21	Enter details of paragraph/section in	Enter	
	which the exhibit relates to here.	page no.	
Eaa	Enter details of some 1/ (' '	here.	
E22	Enter details of paragraph/section in	Enter	
	which the exhibit relates to here.	page no.	
E 22		here.	
E23	Enter details of paragraph/section in	Enter	
	which the exhibit relates to here.	page no.	
		here.	

E24	Enter details of paragraph/section	in	Enter
	which the exhibit relates to here.		page no.
			here.

Table 7-2

If any of the Required Document(s) listed in Table 7-1 is not provided, state your reasons below.

State the name of Required Document <u>not</u> provided	 (e) State the reasons for lack of document (f) If alternative document is provided instead, state the alternative document.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the Family Justice (General) Rules 2024 to be placed between each distinct exhibit.

P.5, r.5 FJ(G)R 2024

57.

E-FORM

Originating Application for Adoption of Child

This Originating Application is to be used when applying for an adoption order for the adoption of a child under the Adoption of Children Act 2022.

This Originating Application form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form, when submitted to the Court, will be generated in accordance with the layout of the generated Originating Application (Form 53).

This Notice serves as a reminder to the Applicant and does not appear as part of the issued Originating Application.

IMPORTANT: Duty to consider amicable resolution

Pursuant to the Family Justice (General) Rules 2024 (FJ(G)R), you are required to consider amicable resolution of the dispute before and after commencing Court proceedings. This means that you should either:

- (a) explore alternative ways of settling the dispute without resorting to legal action OR
- (b) make an offer to the other party to settle the dispute.

For more information on your obligations, please refer to the Information Sheet on Amicable Dispute Resolution and Part 4 of the FJ(G)R.

Section A: Details of Application

Please use Section A1 to A4 (where applicable) in the Originating Application: Generic Sections (Form 53B) to provide the details of application.

Section B: The Parties

 \Box No.

Please use **Section B** in the **Originating Application: Generic Sections (Form 53B)** to provide the Parties' information.

Section C: Child's Particulars

Name in Birth Certificate		Notes
Enter details here.		
Proposed Name		Please enter the new name
Enter details here.		to be given to the child for adoption.
Does the child have an documents)? \Box No.	y other names (e.g. in oth	er
	ication no. and document name	
The child's birth information	on	
Birth Certificate No:	Enter details here.	
Date of birth:	Enter date here.	
Identity/Passport No.:	Enter ID/PP no. here.	
Date of Birth Certificate:	Enter date here.	If the child was born in
Race:	Enter race here.	Singapore, please enter the
Gender:	\Box Male \Box Female	date of registration of birth here.
Place of Birth:	Enter country here.	nore.
Nationality:	Enter country here.	
Country of residence:	Enter country here.	
Has the child ever been ma □ Yes. The child is not eli		Only an unmarried child can be adopted.

2

- 6. Is the child entitled to any property?
 - \Box No
 - □ Yes. Details of property: Enter details here.
- 7. Is the child resident in Singapore?
 - \Box Yes. The child:
 - \Box is a Singapore Citizen.
 - \Box is a Permanent Resident of Singapore.
 - □ holds a valid Dependant Pass issued by the Controller of Immigration for the purposes of the adoption application.
 - □ Others: Enter details here.
 - \Box No. The child:
 - \Box is not present in Singapore.
 - \Box has a valid student's pass.
 - \Box has a valid special pass.
 - □ Others: Enter details here.
- 8. Is the child in the care of the State?
 - □ No

□ Yes. State details: Enter details here.

9. The child's address (in Singapore) Enter details here.

Section D: Other Information

1. Was there any previous adoption order or adoption application in relation to the child?

 \Box No.

☐ Yes. State details: Enter details here.

2. Is the information of the child's biological parents / previous adoptive parents available?

 \Box No.

 \Box Yes. State the following details:

Biological	/ Biological /
Previous Adop	otive Previous Adoptive
Father	Mother

Notes

Name	Enter full name as per NRIC/Passport here.	Enter full name as per NRIC/Passport here.
NRIC / FIN / Passport number	Enter NRIC/ FIN/ Passport no. here.	Enter NRIC/ FIN/ Passport no. here.
Address	Enter address here.	Enter address here.
Nationality	Enter details here.	Enter details here.
Religion	Enter details here.	Enter details here.
Former Name	Enter details here.	Enter details here.
Alias Name	Enter details here.	Enter details here.
Did the parent consent to this Originating Application?	□ No. □ Yes.	□ No. □ Yes.

3. Who has actual custody of the child?

- This Since: Enter date here.
- \Box Parent of the child.
- \Box Guardian of the child.
- \Box Person liable to support the child.
- □ Others. Enter name(s), identity number(s), relationship and address(es) here.

4. Is the party related to the child?

\square No.

 \square Yes. Select the applicable option

Available options for selection: Biological Father, **Biological** Mother, Step-Father, Step-Mother, Foster Parent, Maternal Grandfather, Maternal Grandmother, Maternal Uncle, Maternal Aunt, Maternal Cousin, Paternal Grandfather, Paternal Grandmother,

Paternal Uncle, Paternal Aunt, Paternal Cousin, Sister, Brother, Step-Sister, Half-Sister, Half-Brother, Not Related, Others (Enter details here).

Please state all persons living with the party including tenants, domestic workers etc.

- 5. Is there any person residing with the party?
 - \Box No one resides with this party.
 - \Box Yes. State the following details:

Name	Relationship	Related To
Enter full name as	Enter details here.	Enter details here.
per		
NRIC/Passport		
here.		
Enter full name as	Enter details here.	Enter details here.
per		
NRIC/Passport		
here.		

6. Is there any person whose consent may be required?□ No.

 \Box Yes. State the following details:

Name	Enter full name as per NRIC/Passport here.	Enter full name as per NRIC/Passport here.
NRIC/ FIN/ Passport number	Enter NRIC/ FIN/ Passport no. here.	Enter NRIC/ FIN/ Passport no. here.
Address	Enter address here.	Enter address here.
Capacity of Person whose consent is required	Select the applicable option	Select the applicable option
Did the person consent to this	□ No. Dispensation of consent is required.	□ No. Dispensation of consent is required.
Originating Application?	□ Yes.	\Box Yes.

Available for options selection: Parent of the child, guardian of the child, person with actual custody of the child, person liable to support the child, parent/guardian of minor parent of the child,

spouse of the Applicant.

		Applicant.
7.	Did the party receive or agree to receive any payment or other reward in consideration of the adoption of the child or for any adoption-related service?	
	\square No.	
	☐ Yes. The details of the payment, including the name of payor, the nature and purpose of the payment/reward and the amount is provided in the supporting affidavit.	
8.	Did the party make or give, or agree to make or give, any payment or other reward in consideration of the adoption of the child or for any adoption-related service? \Box No.	
	 Yes. The details of the payment, including the name of payee, the nature and purpose of the payment/reward and the amount is provided in the supporting affidavit. 	
9.	Is the party supporting the child?	
	□ No.□ Yes. Since: Enter date here.	
10.	[Where the party is married and is solely applying for the adoption]	Consent not required if the spouse is a joint
	Does the party's spouse consent to this application?	applicant to the adoption.
	☐ Yes. My spouse's consent has been filed.☐ No, because:	
	\Box my spouse lacks mental capacity.	
	\Box my spouse and I are separated.	
	\Box my spouse and I are undergoing divorce proceedings.	
	\Box my spouse cannot be found.	
	□ Others: Enter details here.	

Section E: Relief(s) Claimed

Please state the relief(s) below.

<u>Notes</u>

Please select the relevant prayer(s) or add prayers as required.

1.	The consent of the following persons be dispensed with: [state name of person(s) and ID number(s)], [state relationship to child].	
2.	The service of the Originating Application and all subsequent documents filed in these proceedings on the following persons be dispensed with: [state name of person(s) and ID number(s)], [state relationship to child].	
3a.	The Applicant(s) be authorised to adopt the said child, [state original name] (original name of child) [also known as [state other name(s), if any] to be called [state new name] born on [insert birthdate], which date is identical with the entry numbered [state entry number of Birth Certificate] and made on [insert date of Birth Certificate] in the Register of Births for the Republic of Singapore.	Where the child is born in Singapore.
3b.	The applicant(s) be authorised to adopt the child, [state original name] (original name of child) [also known as [state other name(s), if any] to be called [state new name] born on [insert birthdate].	Where the child is born outside Singapore.
4.	The Applicant(s) pay(s) the cost of these proceedings to the Guardian-in-Adoption.	
5.	Other orders:	
	State the relief(s) which you are claiming here.	

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Para XX PD 2024

Affidavit for Adoption Order

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]¹

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

Between

No. FC/OAA [number]/[year]

Sub Case No. [number]/[year]²

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name]

[ID No.]

... Respondent(s)

AFFIDAVIT FOR ADOPTION ORDER

Section 1: Introduction

Name of maker(s):	Enter full name as per NRIC/ Passport here.
Identity No(s).:	Enter NRIC/ FIN/ Passport no. here.
Address(es):	Enter address here.
Occupation(s):	Enter occupation here.

- 1a. I am/We* are the Applicant(s) and I/We* make this affidavit in support of my/our* application.
- 1b. Where the facts in this affidavit are within my/our* personal knowledge, they are true. Where they are not within my/our* personal knowledge, they are true to the best of my/our* knowledge, information and belief.
- 1c. I/We* confirm that the information set out in this affidavit is true and correct.

Section 2: Statement

¹ Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

² To insert sub-case details if relevant.

- 2a. The Originating Application For Adoption exhibited on pages [state page no.] herein is the same document generated by the eLitigation system, and the contents entered into the eLitigation system, which now appear in the said Originating Application, are to my/our* best of knowledge and belief in all respects true and accurate.
- **2b.** [Please insert additional contents here and add new paragraphs where necessary (E.g. an explanation on why the consent of the biological parent(s) and other person(s), whose consent is required under the Act, was not obtained or why certain documents are missing or have discrepancies in them, details of any payment or reward made or received in consideration of the adoption of the child or for any adoption-related service etc.]
- 2c. I/We* confirm that the information set out in this affidavit is true and correct.
- 2d. I/We* confirm that the documents exhibited herein and marked as "E" are true copies of the originals.

Section 3: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024 ("FJ(G)R").

Section 4: Supporting Documents³

You must attach, with your application, a copy of the documents in Table 4-1 (if applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 4-2.

You may wish to refer to Part 9, Rule 16 of the FJ(G)R for the consequences of not providing the Required Documents.

Table 4-1

Exhibit	Document Name / Reference in Affidavit to the exhibit	Page
number	(e.g. Paragraph 1 of Section 5)	numbers
Supporting Documents (Standard documents)		

³ Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification (e.g. E1, E2, E3, if the exhibit page starts as page 1).

If any of the documents listed in Table 4-1 is not provided, complete Table 4-2 in this Section.

Section 2		
E1	Birth certificate of the child	Enter page no. here
E2	NRIC/ID of the Applicant(s)	Enter page no. here
E3	Marriage certificate of the Applicant(s) (where applicable)	Enter page no. here
E4	Passport of the Applicant(s) (if the Applicant is not a Singapore Citizen)	Enter page no. here
E5	Passport of the child (if the child is not a Singapore Citizen)	Enter page no. here
E6	Documents in support of the child's residential status in Singapore (e.g. Dependant Pass, evidence of Permanent Residency etc.)	Enter page no. here
E7	Documents in support of the Applicant's residential status in Singapore (e.g. Long Term Visit Pass, Dependant Pass, Employment Pass etc.)	Enter page no. here
E8	Order of dissolution of the Applicant's/ biological parents' marriage (where applicable)	Enter page no. here
E9	Court order(s) in relation to the custody, care and control of the child	Enter page no. here
E10	Consents obtained as required under the Adoption of Children Act 2022	Enter page no. here
E11	Approval(s) required under Part 2 of the Adoption of Children Act 2022 (e.g. letter of eligibility issued for the purpose of an adoption application)	Enter page no. here
E12	Documents in support of any payment or other reward made or given, or agreed to be made or given, by the Applicant(s) in consideration of the adoption of the child or for any adoption- related service	Enter page no. here
E13	Documents in support of any payment or other reward received, or agreed to be received, by the Applicant(s) in consideration of the adoption of the child or for any adoption-related service	Enter page no. here
Other sup	porting documents:	
Exhibit No.	Name of document	Page number
E14	Enter name of document here.	Enter page no. here
E15	Enter name of document here.	Enter page no. here

E16	Enter name of document here.	Enter page no. here
E17	Enter name of document here.	Enter page no. here
E18	Enter name of document here.	Enter page no. here

(Expand the table if required)

Table 4-2

If any of the Required Document(s) listed in Table 4-1 is not provided, state your reasons below.

State the name of the Required Document <u>not</u> provided	(e) State the reasons for lack of document(f) If alternative document is provided instead, state the alternative document.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

(Expand the table if required)

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

[*The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the* FJ(G)R *to be placed between each distinct exhibit.*]

P.5, r.6 FJ(G)R 2024

Notice of Syariah Court Proceedings¹

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application No. FC/OA [number]/[year] Between

Sub Case No. [number]/[year]²

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

NOTICE OF SYARIAH COURT PROCEEDINGS

Are you filing this Notice for:

□ an existing case in Family Justice Courts? State the main case number: Enter case number here.

□ a new case in Family Justice Courts?

1. I am

□ the Applicant

 \Box the Respondent

□ the Co-Respondent

Enter full name or party type here.

If the Syariah Court proceedings are commenced <u>before</u> the family proceedings, you must file this Notice with the first document in the family proceedings.

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¹ If the Syariah Court proceedings are commenced <u>after</u> the family proceedings, you must file this Notice within 7 days of the Syariah Court proceedings.

² To insert sub-case details if relevant.

2. There are divorce proceedings in the Syariah Court. (Please select the applicable option below)

The details of the Syariah Court application are:

- Divorce number Enter no. here. dated Enter date here.
 Decree/divorce order Enter no. here. dated Enter date here.
 Divorce registered under Enter no. here. dated Enter date here.
- 3. If you are filing this Notice in a <u>new</u> case in the Family Justice Courts, proceed to <u>3a</u>. If you are filing this Notice in an <u>existing</u> case in the Family Justice Courts, select <u>3b</u>. You must select 1 option from 3a or 3b.
- 3a. Select the required documents which you will attach:

□ I have obtained the Syariah Court commencement certificate.

The commencement certificate is datedEnter date here.I attach the commencement certificate.

□ My spouse and I have agreed to commence this Originating Application. I attach the consent and Syariah Court certificate of attendance.

3b. Select the applicable option below:

 \Box I have obtained the Syariah Court continuation certificate.

The continuation certificate is dated I attach the continuation certificate.

Enter date here.

- □ My spouse and I have agreed to continue this Originating Application. I attach the consent and Syariah Court certificate of attendance.
- I have yet to obtain either (i) Syariah Court continuation certificate <u>OR</u> (ii) my spouse's consent and Syariah Court certificate of attendance.
 I understand that the Court proceedings in the Family Justice Courts may be stayed until I obtain the required documents.

P.5, r.7 FJ(G)R 2024 Para 46 PD 2024

Originating Application for Mental Capacity Act 2008

This Originating Application is to be used when making a deputyship application or applications under Sections 17, 18 and 19 of the Mental Capacity Act 2008.

This Originating Application form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form, when submitted to the Court, will be generated in accordance with the layout of the generated Originating Application (Form 53).

This Notice serves as a reminder to the Applicant and does not appear as part of the issued Originating Application.

IMPORTANT: Duty to consider amicable resolution

Pursuant to the Family Justice (General) Rules 2024 (FJ(G)R), you are required to consider amicable resolution of the dispute before and after commencing Court proceedings. This means that you should either:

- (a) explore alternative ways of settling the dispute without resorting to legal action OR
- (b) make an offer to the other party to settle the dispute.

For more information on your obligations, please refer to the Information Sheet on Amicable Dispute Resolution and Part 4 of the FJ(G)R.

E-FORM

Section A: Details of Application

Please use Section A1 to A4 (where applicable) in the Originating Application: Generic Sections (Form 53B) to provide the details of application.

Section B: The Parties

Please use **Section B** in the **Originating Application: Generic Sections (Form 53B)** to provide the Parties' information.

Section C: Parties' Details

Deputy Details

1. Is the party asking for a deputy to be appointed?

 \Box No.

 \Box Yes. State the following details:

Name	Enter full name as per NRIC/Passport here.	Enter full name as per NRIC/Passport here.	
Date of birth	Enter date here.	Enter date here.	
Identity Type	NRIC/FIN/Passport etc.	NRIC/FIN/Passport etc.	
NRIC/ FIN/ Passport number	Enter NRIC/ FIN/ Passport no. here.	Enter NRIC/ FIN/ Passport no. here.	
Country of Issue	Enter details here.	Enter details here.	
Occupation	Enter details here.	Enter details here.	
Monthly Income	Enter details here.	Enter details here.	
Nature of Deputyship	Select the applicable option	Select the applicable option	
Address	Enter address here.	Enter address here.	
Employer	Enter name and address of employer here.	Enter name and address of employer here.	

Available options for selection: Property and Affairs, Personal Welfare, Personal Welfare and Property and Affairs.

Notes

P's / Donor's Information

2

- 2. P's Name (as stated in NRIC/Passport) Enter name here.
- 3. P's date of birth: Enter date here.
- 4. **P's identity type, identity number and country of issue** Enter identity type, identity number and the country of issue here.
- Nature of Incapacity: Select the applicable option.
 If "Others" is selected, please specify: <u>Enter details here.</u>

- 6. Marital Status: Select the applicable option
- 7. Type of Accommodation:
 - Housing Development Board
 - □ Nursing/Old Folks/Welfare Homes
 - □ Private Housing
 - □ Others: Enter details here
- 8. <u>P's address</u>

Enter address here.

Available options Accident, are: Alzheimer's Disease, Dementia. Intellectual Disability, Mental Illness, Neurological Disorders, Psychiatric Disorders Cognitive, *Psychiatric* Disorders Developmental, Psychiatric Disorders Psychotic, *Psychiatric* Disorders Substance Related, Schizophrenia, Strokes, Others. Available options

Available options for selection: Single, Widowed, Divorced, Married, Unknown.

- 9. Number of relevant persons: Enter number here
- 10. Is P residing at an organisation providing residential accommodation (e.g. nursing home)?

 \Box Yes. \Box No.

- 11. Does the party need the system to generate a Notice of Proceedings for service on Relevant Persons?
 - \Box Yes. \Box No.

Proceed to Section D.

Section D: Relief(s) Claimed

Please state the relief(s) below.

1. Permission

The Applicant be permitted to make this application to the Court.

2. Dispensation

The Court dispenses with the following:

- a. Notification of [Name of P] ("P") of this application and of the date of the hearing for its final disposal.
- b. Attendance of the following persons at all hearings for this application:
 - i. P;
 - ii. Dr [state name of doctor] (ID No. [state number]) of [state address].
- c. Service of this application on [state names and ID numbers].
- 3. That the Court be satisfied that

Relevant persons shall include children aged 21 and above.

Notes

Please select the relevant prayer(s) or add prayers as required.

There is a general requirement to notify P. As such, if the applicant seeks dispensation of notification, an explanation as to why dispensation is sought has to be included in the supporting affidavit.

- a. [Name of P] ("P") is unable to make various decisions for himself/herself* in relation to a matter or matters concerning P's
 □ personal welfare □ property and affairs □ personal welfare and property and affairs because of an impairment of, or a disturbance in the functioning of, P's mind or brain;
- b. The purpose for which the order is needed cannot be as effectively achieved in a way that is less restrictive of P's rights and freedom of action.
- 4. Appointment of Deputy/Deputies
 - a. [State name] (ID No. [state number]) of [state address] is/are* appointed as deputy/deputies* to make decisions on behalf of P that P is unable to make for himself/herself* in relation to his/her* □ personal welfare □ property and affairs □ personal welfare and property and affairs subject to any conditions or restrictions set out in this order.
 - b. The appointment will last until further order.
 - c. [The deputies shall act □ jointly □ jointly and severally in all matters]
 - d. The deputy/deputies* must apply the principles set out in section 3 of the Mental Capacity Act 2008 and have regard to the guidance in the Code of Practice to the MCA.
 - e. The deputy/deputies* does/do* not have authority to make a decision on behalf of P in relation to a matter if the deputy/deputies* know(s) or has/have* reasonable grounds for believing that P has capacity in relation to the matter.
 - f. In the event the deputy or any of the deputies (where two or more deputies are appointed) dies, becomes a bankrupt (for a property and affairs deputy) or lacks mental capacity to act as deputy, the following are appointed to succeed that deputy in the stated order:
 - i. [State name] (ID No. [state number]) of [state address].
 - ii. [State name] (ID No. [state number]) of [state address].
 - g. Upon the happening of such an event in paragraph (f), the surviving deputy or remaining deputy together with the successor deputy are to inform the Office of the Public Guardian and to apply to Court providing evidence of the

To also include whether or not the deputies act jointly/jointly and severally at the appropriate paragraphs on the deputies' authority and powers in this Originating Application.

The prayer for successor deputy or deputies should only be included if there is a need for a successor deputy or deputies to be appointed, for example, if the proposed deputy likely to is predecease P.

event for the Court to confirm the appointment of the successor deputy.

- 5. Authority of Deputy/Deputies* in respect of P's personal welfare
 - a. The Court grants authority to the deputy/deputies* to make the following decisions on behalf of P, that P is unable to make for himself/herself* when the decision needs to be made:
 - i. where P should live;
 - ii. with whom P should live;
 - iii. consenting to medical or dental examination and treatment on P's behalf;
 - iv. making arrangements for the provision of care services; and
 - v. complaints about P's care or treatment.
 - vi. [to state any other matters for which power is sought for deputy/deputies* to make decision]
 - b. For the purpose of giving effect to any decision the deputy/deputies* may execute or sign any necessary deeds or documents.
 - c. The deputy/deputies* does/do* not have the authority to make the following decisions or to do the following things in relation to P:
 - i. to prohibit any person from having contact with P;
 - ii. to direct a person responsible for P's health care to allow a different person to take over that responsibility;
 - iii. to consent to specific treatment if P has made a valid and applicable advance decision to refuse that specific treatment; and
 - iv. to do an act that is intended to restrain P otherwise then in accordance with the conditions specified in the MCA.
- 6. Authority of Deputy/Deputies* in respect of the property and affairs of P
 - a. The deputy/deputies is/are authorised to do all such acts as may be necessary or expedient for giving effect to the decisions made

in respect of P's property and affairs pursuant to this Order of Court including, but not limited to the authority to:

- i. execute and sign any necessary deeds or documents;
- ii. take control of the property and affairs of P; and
- iii. exercise the same powers of management as P has as beneficial owner.
- b. The deputy/deputies* is/are* authorised to do the following:

Enter the relevant powers sought here.

7. Authority of Deputy/Deputies* in respect of CPF monies and accounts of P [where applicable]

[Please refer to the sample CPF orders on the website of the Family Justice Courts]

8. Costs and Expenses

The deputy/deputies* is/are* authorised to make payment of reasonable legal costs and disbursements of and incidental to these proceedings from P's estate.

- 9. Reports
 - a. The deputy/deputies* is/are* (jointly) required to keep a record of any decisions made or acts done for the personal welfare of P pursuant to this order and the reasons for making or doing them.
 - b. The deputy/deputies* is/are* (jointly) required to keep statements, vouchers, receipts and other financial records in the administration of P's property and affairs. The deputy/deputies* is/are* also (jointly) required to keep a record of decisions made or acts done relating to P's property and affairs.
 - c. The deputy/deputies* must (jointly) complete and file an annual report relating to P's personal welfare and property and affairs to

For example, a decision that P will not undergo a medical procedure is to be recorded and the reason to be provided.

For example, a decision not to expend monies for a medical procedure for P which is medically indicated is to be recorded and the reason to be provided.

the Public Guardian and further reports at any time as may be required by the Public Guardian. In addition, the deputy/deputies* must (jointly) complete and file a report relating to P's personal welfare and property and affairs to the Public Guardian within 3 months of the date of this Order.

- d. Reports to the Public Guardian must contain such information and be in such form as may be required by the Public Guardian and must contain (but are not limited to) the following:
 - i. a record of any decisions made or acts done for the personal welfare of P and the reasons for making or doing them;
 - ii. a record of decisions made or acts done relating to P's property and affairs;
 - iii. an inventory of the assets belonging to P and the value and location of the assets; and
 - iv. statements, vouchers, receipts and other financial records in the administration of P's property and affairs.
- 10. There be liberty to apply.

State the relief(s) which you are claiming here.

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P.5, r.7 FJ(G)R 2024 Para 46 PD 2024 P.7, r.20 FJ(G)R 2024 Para 54(8A) PD 2024

Affidavit (For Appointment of Deputy)

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]¹

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

Between

No. FC/OAM [number]/[year]

[Applicant's name]

[ID No.]

Sub Case No. [number]/[year]²

... Applicant(s)

And

[Respondent's name]

[ID No.]

... Respondent(s)

AFFIDAVIT (For appointment of Deputy)

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/ Passport here
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

1a. I am the Applicant and I make this affidavit in support of my application.

1b. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

¹ Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

² To insert sub-case details if relevant.

1c. I confirm that the information set out in this affidavit is true and correct.

Section 2: Applicant's Particulars

Name of Applicant:	
--------------------	--

Identity No.:

Date of birth:

Age:

Gender:

Telephone number:

Email:

Occupation:

Name and address of

employer:

Monthly income:

Enter NRIC	C/ FIN/ Passport	no. here.
Enter date l	here.	
Enter age h	lere.	
□ Male	□ Female	
Enter telep	hone no. here.	
Enter email	l address here.	
Enter occuj	pation here.	
Enter detail	<u>ls here.</u>	

Enter full name as per NRIC/ Passport here.

Source of Income	Value
(e.g. salary, insurance, government payouts, rental etc.)	Enter value here.
(e.g. salary, insurance, government payouts, rental etc.)	Enter value here.
TOTAL	Enter total here.

Relationship to patient ("P") as referred to in Section 4 below (i.e. the person alleged to lack capacity):³

Select the applicable option.

If "Others" is selected, please specify: Enter details here.

Section 3: Information about Applicant

3a. *Please indicate the options applicable to you.*

- \Box I am not an undischarged bankrupt.
- □ I am not facing any bankruptcy actions.

³ Spouse, child, parent, sibling, friend, others.

- □ I have not been appointed as a Donee or Deputy for someone else.
- □ To the best of my knowledge and belief, I have not been the subject of any formal complaint to the Office of the Public Guardian.
- ☐ I have not been suspended or removed in respect of any appointment as a Donee or Deputy for anyone.

3b. *Please indicate the options applicable to you.*

- □ I declare that I do not have any outstanding loans or debts at all.
- □ I declare that I do not have any outstanding loans or debts except for the following loans / debts, and I further declare that I am able to pay my loans and debts as and when they become due and payable.

S/N	Type of	Particulars of debt/liability	Amount owed
	debt/liability		
(i)	Enter details here	Enter details here	Enter amount
			here
(ii)	Enter details here	Enter details here	Enter amount
			here
(iii)	Enter details here	Enter details here	Enter amount
			here
		TOTAL	Enter total
			amount here

Section 4: Information about P

Name of P:	Enter full name as per NRIC/ Passport here.		
Identity No.:	Enter NRIC/ FIN/ Passport no. here.		
Date of birth:	Enter date here.		
Age:	Enter age here.		
Gender:	\Box Male \Box Female		
Marital status: ⁴	Select the applicable option		
Address at which P is currently residing:	Enter addresss here.		

⁴ Available options are: Single, married, divorced, separated, widowed, unknown.

4a. Is P living at an organisation providing accommodation (e.g. nursing home / community hospital)?

 \Box No. \Box Yes. Enter details here.

4b. Do you confirm that, to the best of your knowledge and belief, P's incapacity is as set out in the doctor's affidavit(s) and medical report(s) filed in support of your application?

 \Box No. \Box Yes.

4c. P's current care arrangements and main caregiver(s):

When did P start staying at the current residence?

Enter details here.

Who is P living with?

Enter details here.

Who is P's main caregiver(s) and what is the caregiver's contact?

Enter details here.

How often does the Applicant visit P?

Enter details here.

When was the Applicant's last visit to P if they do not live in the same household?

Enter details here.

4d. P's expenses:⁵

S/N	••	Particulars of expense	Amount	Frequency
	expense			(Monthly /
				Annually / One-
				off)
(i)	Food &	Enter details here	Enter	Enter details here
	sundries		amount	
			here	
(ii)	Medical	Enter details here	Enter	Enter details here
			amount	
			here	
(iii)	Transport	Enter details here	Enter	Enter details here
			amount	
			here	
(iv)	Utilities	Enter details here	Enter	Enter details here
			amount	
			here	
(v)	Foreign	Enter details here	Enter	Enter details here
	Domestic		amount	
	Worker		here	
	(FDW) Salary			
	and Levy			
(vi)	Nursing	Enter details here	Enter	Enter details
	Home fees		amount	here
			here	

⁵ Please include any expenses which P currently does not have but is expected to incur in future and indicate these with an '*'.

(vii)	Insurance	Enter details here	Enter	Enter details
	Premiums		amount	here
			here	
(viii)	Others	Enter details here	Enter	Enter details
			amount	here
			here	
		TOTAL	Enter total	amount here

4e. P's income and sources of such income:⁶

S/N	Source of income	Particulars of income	Amount	Frequency (Monthly / Annually / One- off)
(i)	Salary (e.g. pension)	Enter details here	Enter amount here	Enter details here
(ii)	Financial assistance from government / social / religious organisations	Enter details here	Enter amount here	Enter details here
(iii)	CPF pay-out (e.g. CPF LIFE)	Enter details here	Enter amount here	Enter details here
(iv)	Rental	Please provide relevant details such as the address of the property and length of the lease	Enter amount here	Enter details here

⁶ Please include any income which P currently does not have but is expected to receive in future and indicate these with an '*'.

(v)	Dividends	Please provide relevant	Enter	Enter details here
		details such as the name	amount	
		of the company	here	
(vi)	Others (e.g.	Enter details here	Enter	Enter details
	inheritance,		amount	here
	gifts,		here	
	allowances,			
	sale of other			
	assets,			
	gratuity,			
	compensation			
	pay-outs)			
	1	TOTAL	Enter total	amount here

4f. P's assets and up to date value (to the best of your knowledge) of these assets:

S/N	Type of asset	Particulars of asset	Amount	
(i)	CPF	Ordinary Account (OA)	Enter amount	
			here	
		Special Account (SA)	Enter amount	
			here	
		MediSave Account (MA)	Enter amount	
			here	
		Retirement Account (RA)	Enter amount	
			here	
(ii)	Bank account	Please provide relevant details such as	Enter amount	
		the name of the bank and the account	here	
		number		
(iii)	Insurance	Please provide relevant details such as	Enter amount	
	policy	the name of the insurance company	here	
		and the policy number		
(iv)	Investment	Please provide relevant details such as	Enter amount	
	(e.g., stocks,	the name of the company and the	here	
	shares)	number of shares held		

(v)	Property	Please provide relevant details such as	Enter	amount
		the address of the property	here	
(vi)	Other asset(s)	Enter details here	Enter	amount
			here	
		TOTAL	Enter	total
			amount	here

4g. Please indicate which options are applicable and provide details where applicable.

□ P has no outstanding debts or liabilities.

 \Box P's debts or liabilities are as follows:

S/N	Type of debt/liability	Particulars of	Amount owed
		debt/liability	
(i)	Loans (secured or	Enter details here	Enter amount here
	unsecured)		
(ii)	Outstanding Bills ⁷	Enter details here	Enter amount here
(iii)	Credit card debt	Enter details here	Enter amount here
(iv)	Court-ordered	Enter details here	Enter amount here
	spousal/child		
	maintenance		
		TOTAL	Enter total amount
			here

- 4h. *Please indicate which options are applicable and provide details where applicable.*
 - P has not received and is not going to receive any form of compensation or award of damages
 - □ P has received or is going to receive the following compensation or award of damages:

S/N	Nature of claim	Status of claim / Amount
		proceedings ⁸

⁷ E.g. hospital, nursing home.

⁸ E.g. not commenced, pending, concluded, withdrawn, judgment sum ordered / award made.

(i)	Enter details here	Enter details here	Enter amount here
(ii)	Enter details here	Enter details here	Enter amount here
		TOTAL	Enter total amount
			here

4i. Lasting Power of Attorney

Please indicate which of the following is applicable, and please exhibit the relevant search results.

- □ P made a Lasting Power of Attorney and the Registration No. is: Enter details here.
- □ P made an instrument intended to create a Lasting Power of Attorney but it has not been registered yet.
- □ P has not made a Lasting Power of Attorney and, as far as I am aware, P has not made an instrument intended to create a Lasting Power of Attorney.

4j. Has P made a will?

- \Box No. \Box Yes. \Box I do not know.
- 4k. Previous legal applications concerning P

Please indicate which of the following is applicable.

- ☐ There has been no application or order made relating to P under the Mental Capacity Act 2008 as well as the repealed Mental Disorders and Treatment Act.
- There was an application or order made relating to P under the Mental Capacity Act 2008 or the repealed Mental Disorders and Treatment Act in case no. Enter details here.
- □ Have the Applicant(s) and/or P been involved in any kind of Court proceedings (e.g. criminal, civil, family or tribunal proceedings)?
 - \Box No. \Box Yes. Enter details here
- ☐ Are there any intended court proceedings involving the Applicant(s) which may directly or indirectly affect the rights or obligations of P?

 \Box No. \Box Yes. Enter details here

Section 5: Information about Relevant Persons

Please do not leave any blanks. Please state "Nil" if there is no one in the category in question. If a Relevant Person has passed away, please state the person's name and indicate "(deceased)" after the name. Please list all of P's relatives in the categories set out below even if you are of the view that some or all of them are not, by definition, Relevant Persons. If you feel that certain relatives are not Relevant Persons, please set out your reasons in the space provided below. Use additional rows if required.

	Name	NRIC/FIN/Passport	Age
		No.	
Spouse	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Mother	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Father	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Child	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Child	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Sibling	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Sibling	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	

5a. The Relevant Persons are:

5b. Other Relevant Persons who are likely to have an interest in an application concerning P⁹:

Full name	NRIC/FIN/Passport No.	Age	Relationship to P
Enter name here	Enter NRIC/FIN/PP no.	Enter age here	Enter details here
Enter name here	Enter NRIC/FIN/PP no.	Enter age here	Enter details here
Enter name here	Enter NRIC/FIN/PP no.	Enter age here	Enter details here

5c. Have you obtained the consent of the Relevant Persons named above?¹⁰

\Box Yes.

□ No. If you have not done so, explain why:

Enter details here

Section 6: Information about Orders Requested

6a. Of all relevant persons, why are you best suited to be appointed the Deputy/Deputies for the patient?

Please state the reasons why you believe the Court should appoint you as Deputy/Deputies

⁹ E.g. persons who have a close relationship with P, persons who have a legal duty to support P, persons who will benefit from P's estate, persons who are responsible for P's care.

¹⁰ You will normally have to obtain the consent of the Relevant Persons named above. If you have not done so, please explain why.

6b. What is your proposed plan for the care of P? ("care arrangements")

Please include details of P's medical condition and treatment

6c. What is your proposed plan for the management of P's property and affairs ("financial management plan")? Please state for instance how would P's monies be used in respect of his expenses, and if any investments would be made.

Enter details here.

6d. Why do you require an Order under the Mental Capacity Act 2008 at this point in time?

Please state the circumstances that may have required or led to this application being filed.

Section 7: Confirmation

- 7a. I confirm that:
 - \Box there are no other relevant persons who may be interested in this application;
 - there are no other relatives or friends who have a close relationship with P;
 - there are no other persons who have a legal duty to support P;
 - \Box there are no other persons who will benefit from P's estate; and
 - \Box there are no other persons who are responsible for P's care.
- 7b. I declare and undertake as follows:
 - □ I understand my responsibilities if I am appointed as Deputy or Successor Deputy. In particular, I understand that I must act with honesty and integrity and ensure that my personal interests do not conflict with my duties as P's deputy, and I will not use my position for any personal benefit.
 - □ I will have regard to the Mental Capacity Act Code of Practice and act in accordance with the principles of the Mental Capacity Act 2008. In particular, I will act and make decisions for P in P's best interests.

- □ I will inform the Public Guardian if I have any reason to believe that P no longer lacks capacity and may be able to make his own decisions about the matters for which a deputy is sought to be appointed. I understand that I will not have the power to make a decision on P's behalf in relation to a matter if I know or have reasonable ground for believing that P has capacity in relation to the matter.
- □ I understand that if I am appointed as a deputy, the Public Guardian may contact me via SMS and/or email.
- 7c. I confirm that the documents exhibited herein and marked are true copies of the originals.
- 7d. Upon the Court declaring that P lacks capacity to make decisions about the matters set out in the Applicant's Form, I seek an order in terms of my application.

Section 8: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024 ("FJ(G)R").

Section 9: Supporting Documents¹¹

You must attach, with your application, a copy of the documents in Table 9-1 (if applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 9-2.

You may wish to refer to Part 9, Rule 16 of the FJ(G)R for the consequences of not providing the Required Documents.

Table 9-1

Exhibit number	Document Name / Reference in Affidavit to the exhibit (e.g. Paragraph 1 of Section 5)	Page numbers
Supportin	g Documents (Standard documents)	
Section 2		
E1	Documents that prove the Applicant's relationship to P (e.g. Birth Certificate, Marriage Certificate, Adoption Order etc.)	Enter page no. here

¹¹ Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification (e.g. E1, E2, E3, if the exhibit page starts as page 1).

If any of the documents listed in Table 9-1 is not provided, complete Table 9-2 in this Section.

		1
Section 4		
E2	Documents relating to P's assets (e.g. bank statements, CPF statements, CDP statements, insurance documents, title search documents etc.)	Enter page no here
E3	Office of the Public Guardian search result showing if P has registered a Lasting Power of Attorney	Enter page no here
E4	Office of the Public Guardian search result showing if there is a past Mental Capacity Act 2008 or Mental Disorders And Treatment Act Order in respect of P	Enter page no. here
E5	Wills Registry search result showing if P has registered a Will	Enter page no here
E6	A copy of P's will (if "Yes" is answered for Section 4 question 4j)	Enter page no here
Other sup	porting documents:	
Exhibit No.	Name of document	Page number
E7	Enter name of document here.	Enter page no. here
E8	Enter name of document here.	Enter page no. here
E9	Enter name of document here.	Enter page no. here
E10	Enter name of document here.	Enter page no. here

(Expand the table if required)

Enter name of document here.

Table 9-2

E11

If any of the Required Document(s) listed in Table 9-1 is not provided, state your reasons below.

State the name of the Required Document not provided	(g) State the reasons for lack of document(h) If alternative document is provided instead, state the alternative document.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

Enter page no. here

Enter details here.	Enter details here.
Enter details here.	Enter details here.

(Expand the table if required)

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the FJ(G)R to be placed between each distinct exhibit.

61.

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Para 54(x1) PD 2024

Affidavit (Doctor's Affidavit)

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]¹

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OAM [number]/[year]

Between [Applicant's name]

Sub Case No. [number]/[year]²

... Applicant(s)

And

[Respondent's name]

[ID No.]

[ID No.]

... Respondent(s)

AFFIDAVIT (Doctor's affidavit)

Note:

If the doctor's report is directly submitted in iFAMS, proceed to Header "Medical Report".

Section 1: Introduction

Name of maker: Enter full name as per NRIC/ Passport here.

Identity No.: Enter NRIC/ FIN/ Passport no. here.

Address: Enter address here.

Occupation: Enter occupation here.

1. I am a registered medical practitioner in Singapore.

¹ Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

² To insert sub-case details if relevant.

- 2. The facts contained in this affidavit and the medical report exhibited herein are within my personal knowledge or are based on documents in my possession.
- 3. I confirm that the medical report exhibited herein and marked as "E" is mine and that I accept full responsibility for the said report.
- 4. I am aware that my report is being adduced for the purpose of obtaining a declaration that the patient who is the subject of this application, i.e. P, [Enter full name as per NRIC/FIN/Passport here], [Enter NRIC/Fin/Passport no. here], lacks capacity in relation to matters specified in the application.

Section 2: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024 ("FJ(G)R").

³This is the exhibit marked "**E**" referred to in the affidavit of [name of doctor] and sworn / affirmed^ before me on this [date].

Before me,

A Commissioner for Oaths

³ The page numbers for the exhibits should run consecutively from the last page of the affidavit.

Medical Report

The entries in this form should be typed and not handwritten

Section 1: Patient's Particulars

Name of patient:	Enter full name as per NRIC/ Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Age:	Enter age here.

Section 2: Doctor's Particulars

Name of doctor:	Enter full name as per NRIC/ Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
MCR no. of doctor:	Enter MCR no. here.
Area of specialty:	Enter area of specialty here.
Hospital / Clinic name and	Enter details here.
address:	
Doctor's qualifications and	Enter details here.
experience in this area of work:	
Doctor-patient relationship:	Please state if you have been seeing the patient regularly
	over a period of time (if so, please state when you first
	started seeing the patient and how often you see the
	patient) or if you saw the patient specifically for this

Section 3: Patient's Medical Information

3a. Patient's clinical history:

Please note that you should provide sufficient detail to support your opinion in respect of P's mental capacity. Please also state the source of the information (e.g. from medical records, from the patient, from the Applicant etc.

mental capacity assessment only.

3b. Findings from physical examination / mental state examination:

Please note that you should provide sufficient detail to support your opinion in respect of P's mental capacity. Please also note that there should not be an overly long period between the date of examination of P and the date of this report.

Date of physical examination / mental state examination: Enter date here.

3c. Relevant investigation results:

Enter details here

3d. Diagnosis:

Enter details here

3e. Is (or was) P attending a special education school?

\Box No. \Box Yes.	Enter	details	here.	1
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Section 4: Opinion on Patient's Mental Capacity

Note: If the doctor's report is directly submitted in iFAMS, refer to Section 4A instead.

Opinion on patient's mental capacity in relation to personal welfare⁴

- 4a. In your opinion, can the patient understand information relevant to a decision relating to his or her personal welfare?
 - \Box No. \Box Yes.

Enter details here

- 4b. In your opinion, can the patient retain information long enough to make a decision relating to his or her personal welfare?
 - \Box No. \Box Yes.

Enter details here

- 4c. In your opinion, can the patient weigh information as part of the process of making a decision relating to his or her personal welfare?
 - \Box No. \Box Yes.

⁴ If you are unable to state "Yes" or "No" in respect of a particular question, please state your opinion of P in respect of that item and provide sufficient supporting information.

	Enter details here
4d.	In your opinion, can the patient communicate his or her decision relating to his or her personal welfare?
	\Box No. \Box Yes.
	Enter details here
4e.	Taking into consideration the above, in your opinion, does the patient have mental capacity in respect of personal welfare?
	\Box No. \Box Yes.
	Enter details here
Opinio	on on patient's mental capacity in relation to property and affairs ⁵
4f.	In your opinion, can the patient understand information relevant to a decision relating to his or her property and affairs?
	\Box No. \Box Yes.
	Enter details here
4g.	In your opinion, can the patient retain information long enough to make a decision relating to his or her property and affairs?
	\Box No. \Box Yes.
	Enter details here

4h. In your opinion, can the patient weigh information as part of the process of making a decision relating to his or her property and affairs?

⁵ If you are unable to state "Yes" or "No" in respect of a particular question, please state your opinion of P in respect of that item and provide sufficient supporting information.

\Box No. \Box Yes.

Enter details here

4i. In your opinion, can the patient communicate his or her decision relating to his or her property and affairs?

∃ Yes.

Enter details here

4j. Taking into consideration the above, in your opinion, does the patient have mental capacity in respect of property and affairs?



Enter details here

Opinion

4k. Please state the basis of your opinion above in respect of the patient's mental capacity:

Enter details here

41. Prognosis:

In your opinion, is the patient likely to regain mental capacity?

 \Box No. \Box Yes. \Box Not sure.

If "Yes" or "Not Sure", please suggest when another assessment of the patient's mental capacity should be carried out:

Enter details here

4m. In your opinion, would the patient understand if he/she were to be informed of this application?

 \Box No. \Box Yes.

4n. Are you aware of any other doctor who holds a different professional opinion regarding the patient's mental capacity? If so, please provide details:

Enter details here

Section 4A: Opinion on Patient's Mental Capacity

Only for use in iFAMS submission

In my professional opinion:

- 1. The patient does not have mental capacity in respect of personal welfare and property and affairs matters.
- 2. The patient is not likely to regain mental capacity.
- 3. The patient would not understand if he / she were to be informed of the proposed application to Court.

THE PATIENT IS UNABLE TO MAKE DECISIONS ON THE FOLLOWING MATTERS:

□ All personal welfare and property and affairs matters.

I have reached this view because the patient is unable to do the following:

- 1. Understand information relevant to such a decision
- 2. Retain information relevant to such a decision
- 3. Use or weigh information as part of the process of making such a decision
- 4. Communicate his or her decision on such a matter

OR

☐ The patient has regained mental capacity in respect of personal welfare and property and affairs matters.

Section 5: Declaration

If the doctor's report is directly submitted in *iFAMS*, refer to Section 5A instead.

Notes

- 5a. I have read and understood the provisions in sections 3, 4 and 5 of the Mental Capacity Act 2008.
- 5b. I understand that my medical report has to contain sufficient detailed information about P's condition to support my opinion of P's mental capacity.
- 5c. I believe in the correctness of the opinion set out herein.
- 5d. I understand that in giving this report my duty is to the Court and I confirm that I have complied with this duty.

Signed by:

Signature Name: Enter name here. Date: Enter date here.

Section 5A: Declaration

(Only for use in iFAMS submission)

I, []	Enter name here] , confirm and declare as follows –	Notes
1.	I have read and understood sections 3, 4 and 5 of the Mental Capacity Act 2008.	
2.	I am aware that my report is being adduced for the purpose of obtaining a declaration that P lacks mental capacity.	
3.	I am aware that a copy of this report may be sent to my hospital's medical records office or equivalent department.	
4.	I confirm that the medical report which I am submitting herewith is mine and that I accept full responsibility for this report.	
5.	I believe in the correctness of the opinion set out in my medical report.	
6.	As far as I am aware, no other doctor or medical professional holds a different opinion on this patient's medical condition and mental capacity.	
7.	I understand that in giving this medical report my duty is to the Court and I confirm that I have complied with this duty.	

Date of submission: Enter date here.

Confirmed and submitted by [Enter name here] using \Box Singpass \Box Corppass

Explanatory notes:

- 1. "Personal welfare" refers to matters such as deciding where to live and consenting to medical and dental treatment.
- 2. "Property and affairs", as the name implies, refers to matters concerning the patient's financial affairs and property.
- 3. When giving your opinion on the patient's mental capacity, please note that where it is not patently obvious from the clinical history and examination that the patient has or lacks capacity, you will need to explain the basis for your opinion.

Section 3 of the Mental Capacity Act 2008

- (1) The following principles apply for the purposes of this Act.
- (2) A person must be assumed to have capacity unless it is established that he lacks capacity.
- (3) A person is not to be treated as unable to make a decision unless all practicable steps to help him to do so have been taken without success.
- (4) A person is not to be treated as unable to make a decision merely because he makes an unwise decision.
- (5) An act done, or a decision made, under this Act for or on behalf of a person who lacks capacity must be done, or made, in his best interests.
- (6) Before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

Section 4 of the Mental Capacity Act 2008

- (1) For the purposes of this Act, a person lacks capacity in relation to a matter if at the material time he is unable to make a decision for himself in relation to the matter because of an impairment of, or a disturbance in the functioning of, the mind or brain.
- (2) It does not matter whether the impairment or disturbance is permanent or temporary.
- (3) A lack of capacity cannot be established merely by reference to
 - (a) a person's age or appearance; or
 - (b) a condition of his, or an aspect of his behaviour, which might lead others to make unjustified assumptions about his capacity.

- (4) In proceedings under this Act (other than proceedings for offences under this Act), any question whether a person lacks capacity within the meaning of this Act must be decided on the balance of probabilities.
- (5) Subject to section 21, no power which a person ("D") may exercise under this Act
 - (a) in relation to a person who lacks capacity; or
 - (b) where D reasonably thinks that a person lacks capacity,

is exercisable in relation to a person below 21 years of age.

Section 5 of the Mental Capacity Act 2008

- (1) For the purposes of section 4, a person is unable to make a decision for himself if he is unable
 - (a) to understand the information relevant to the decision;
 - (b) to retain that information;
 - (c) to use or weigh that information as part of the process of making the decision; or
 - (d) to communicate his decision (whether by talking, using sign language or any other means).
- (2) A person is not to be regarded as unable to understand the information relevant to a decision if he is able to understand an explanation of it given to him in a way that is appropriate to his circumstances (using simple language, visual aids or any other means).
- (3) The fact that a person is able to retain the information relevant to a decision for a short period only does not prevent him from being regarded as able to make the decision.
- (4) The information relevant to a decision includes information about the reasonably foreseeable consequences of
 - (a) deciding one way or another; or
 - (b) failing to make the decision.

62.

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Para 54(10) PD 2024

Affidavit (For Appointment of Successor Deputy)

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]¹

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OAM [number]/[year]

Sub Case No. [number]/[year]²

[Applicant's name] [ID No.]

... Applicant(s)

And

Between

[Respondent's name]

[ID No.]

... Respondent(s)

AFFIDAVIT (For appointment of Successor Deputy)

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/ Passport here. [name of Successor Deputy]
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

- 1. I am the Successor Deputy proposed to be appointed to make decisions and act on behalf of the patient ("P") as referred to in Section 4 below.
- 2. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.
- 3. I confirm that the information set out in sections 2, 3 and 4 below is true and correct.

¹ Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

² To insert sub-case details if relevant.

Section 2: Successor Deputy's Particulars

Name of Successor Deputy:

Identity No.:

Date of birth:

Age:

Gender:

Telephone number:

Email:

Occupation:

Name and address of employer:

Monthly income:

Enter full name as per NRIC/ Passport here. Enter NRIC/ FIN/ Passport no. here.

Enter date here.

Enter age here.

 \Box Male \Box Female

Enter telephone no. here.

Enter email address here.

Enter occupation here.

Enter details here.

Source of Income	Value
(e.g. salary, insurance, government payouts, rental etc.)	Enter value here.
(e.g. salary, insurance, government payouts, rental etc.)	Enter value here.
TOTAL	Enter total here.

Relationship to P as referred to in Section 4 below (i.e. the person alleged to lack capacity):³ Select the applicable option.

If "Others" is selected, please specify: <u>Enter details</u> <u>here.</u>

Section 3: Information about Successor Deputy

3a. Please indicate which options are applicable to you.

□ I am not an undischarged bankrupt.

 \Box I am not facing any bankruptcy actions.

³ Available options are: Spouse, child, parent, sibling, friend, others.

- ☐ I have not been appointed as a Donee or Deputy for someone else.
- □ To the best of my knowledge and belief, I have not been the subject of any formal complaint to the Office of the Public Guardian.
- ☐ I have not been suspended or removed in respect of any appointment as a Donee or Deputy for anyone
- 3b. Please indicate which option is applicable to you.
 - □ I declare that I do not have any outstanding loans or debts at all.
 - □ I declare that I do not have any outstanding loans or debts except for the following loans / debts, and I further declare that I am able to pay my loans and debts as and when they become due and payable.

S/N	Type of	Particulars of debt/liability	Amount owed
	debt/liability		
(i)	Enter details here	Enter details here	Enter amount
			here
(ii)	Enter details here	Enter details here	Enter amount
			here
(iii)	Enter details here	Enter details here	Enter amount
			here
		TOTAL	Enter total
			amount here

3c. Previous legal applications concerning Applicant(s) and / or P

Have you and/or P been involved in any kind of Court proceedings (e.g. criminal, civil, family or tribunal proceedings)?

□ No □ Yes. Enter details here.

Are there any intended court proceedings involving the Applicant(s) which may directly or indirectly affect the rights or obligations of P?

□ No □ Yes. Enter details here.

Section 4: Information about P

Name of P:

Enter full name as per NRIC/ Passport here.

Identity No.:

Enter NRIC/ FIN/ Passport no. here.

Section 5: Confirmation

- 5a. I understand the nature of the order which is applied for in these proceedings:
 - ☐ I have read and understood all the contents of the Originating Application and the supporting affidavits.
 - □ I consent to the Originating Application filed in these proceedings.
 - □ I consent to the dispensation of service of the Originating Application, supporting affidavits and all subsequent documents filed in these proceedings on me.
 - \Box I consent to the \Box care arrangements \Box financial management plan \Box care arrangements and financial management plan proposed by the Applicant(s) and I understand that I am to abide by all orders made by the Court.
- 5b. I declare and undertake as follows:
 - □ I understand my responsibilities if I am appointed as Successor Deputy. In particular, I understand that I must act with honesty and integrity and ensure that my personal interests do not conflict with my duties as P's deputy, and I will not use my position for any personal benefit.
 - □ I will have regard to the Mental Capacity Act Code of Practice and act in accordance with the principles of the Mental Capacity Act 2008. In particular, I will act and make decisions for P in P's best interests.
 - □ I will inform the Public Guardian if I have any reason to believe that P no longer lacks capacity and may be able to make his own decisions about the matters for which a deputy is sought to be appointed. I understand that I will not have the power to make a decision on P's behalf in relation to a matter if I know or have reasonable ground for believing that P has capacity in relation to the matter.
 - □ I understand that if I am appointed as a successor deputy, the Public Guardian may contact me via SMS and/or email.
- 5c. I confirm that the documents exhibited herein and marked are true copies of the originals.

Section 6: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024 ("FJ(G)R").

Section 7: Supporting Documents⁴

You must attach, with your application, a copy of the documents in Table 7-1 (if applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 7-2.

You may wish to refer to Part 9, Rule 16 of the FJ(G)R for the consequences of not providing the Required Documents.

Table 7-1

r		
Exhibit number	Document Name / Reference in Affidavit to the exhibit (e.g. Paragraph 1 of Section 5)	Page numbers
Supportin	ng Documents (Standard documents)	
Section 2		
E1	Documents that prove the successor deputy's relationship to P (e.g. Birth Certificate, Marriage Certificate, Adoption Order etc.)	Enter page no. here
Other sup	oporting documents:	
Exhibit No.	Name of document	Page number
E2	Enter name of document here.	Enter page no. here
E3	Enter name of document here.	Enter page no. here
E4	Enter name of document here.	Enter page no. here
E5	Enter name of document here.	Enter page no. here
E6	Enter name of document here.	Enter page no. here

(Expand the table if required)

Table 7-2

⁴ Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification (e.g. E1, E2, E3, if the exhibit page starts as page 1).

If any of the documents listed in Table 7-1 is not provided, complete Table 7-2 in this Section.

If any of the Required Document(s) listed in Table 7-1 is not provided, state your reasons below.

State the name of the Required Document not provided	(i) State the reasons for lack of document(j) If alternative document is provided instead, state the alternative document.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

(Expand the table if required)

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the FJ(G)R to be placed between each distinct exhibit.

63.

PDF UPLOAD

Para X PD 2024

Affidavit (For Direct Payment – No Deputy)

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]¹

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OAM [number]/[year]

Sub Case No. [number]/[year]²

[Applicant's name] [ID No.]

... Applicant(s)

And

Between

[Respondent's name]

[ID No.]

... Respondent(s)

AFFIDAVIT

(For direct payment of P's insurance or hospital / nursing home charges with no appointment of Deputy)

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/ Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

1a. I am the Applicant and I make this affidavit in support of my application.

- 1b. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.
- 1c. I confirm that the information set out in this affidavit is true and correct.

¹ Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

² To insert sub-case details if relevant.

Section 2: Applicant's Particulars

Name of Applicant:	Enter full name as per NRIC/ Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Age:	Enter age here.
Telephone number:	Enter telephone no. here.
Email:	Enter email address here.
Name and address of employer:	Enter details here.
Relationship to patient ("P") as	Select the applicable option.
referred to in Section 3 below (i.e. the person alleged to lack capacity): ³	If "Others" is selected, please specify: <u>Enter details</u> <u>here.</u>

Section 3: Information about P

Name of P:	Enter full name as per NRIC/ Passport here.		
Identity No.:	Enter NRIC/ FIN/ Passport no. here.		
Date of birth:	Enter date here.		
Age:	Enter age here.		
Gender:	□ Male □ Female		
Marital status: ⁴	Select the applicable option		
Address at which P is currently residing:	Enter addresss here.		

3a. Is P living nursing / residential home?

□ No. □ Yes. <u>Please state which nursing/residential home.</u>

- 3b. Do you confirm that, to the best of your knowledge and belief, P's incapacity is as set out in the doctor's affidavit(s) and medical report(s) filed in support of your application?
 - \Box No. \Box Yes.
- 3c. P's medical / nursing home bills and recurrent expenses:

³ Available options are: Spouse, child, parent, sibling, friend, others.

⁴ Available options are: Single, married, divorced, separated, widowed, unknown.

S/N	Type of	Particulars of expense	Amount	Frequency
	expense			(Monthly /
				Annually / One-
				off)
(i)	Enter details	Enter details here	Enter	Enter details here
	here		amount	
			here	
(ii)	Enter details	Enter details here	Enter	Enter details here
	here		amount	
			here	
(iii)	Enter details	Enter details here	Enter	Enter details here
	here		amount	
			here	
		TOTAL	Enter total ar	nount here

3d. P's income and sources of such income (to the best of your knowledge):

S/N	Source of	Particulars of income	Amount	Frequency
	income			(Monthly /
				Annually / One-
				off)
(i)	Salary (e.g.	Enter details here	Enter	Enter details
	pension)		amount	here
		~	here	
(ii)	Government	Enter details here	Enter	Enter details
	support (e.g.		amount	here
	GST)		here	
(iii)	CPF pay-out	Enter details here	Enter	Enter details
	(e.g. CPF		amount	here
	LIFE)		here	
(iv)	Charitable/	Enter details here	Enter	Enter details
	non-		amount	here
	governmental		here	

	organisation			
	pay-out (e.g.			
	financial			
	assistance)			
(v)	Rental	Please provide relevant	Enter	Enter details
		details such as the	amount	here
		address of the property	here	
		and length of the lease		
(vi)	Dividends	Please provide relevant	Enter	Enter details
		details such as the name	amount	here
		of the company	here	
(vii)	Others ⁵	Enter details here	Enter	Enter details
			amount	here
			here	
		TOTAL	Enter total ar	nount here

3e. P's assets and up to date value (to the best of your knowledge) of these assets:

S/N	Type of asset	Particulars of asset	Amoun	nt
(i)	CPF	Ordinary Account (OA)	Enter	amount
			here	
		Special Account (SA)	Enter	amount
			here	
		MediSave Account (MA)	Enter	amount
			here	
		Retirement Account (RA)	Enter	amount
			here	
(ii)	Bank account	Please provide relevant details such as	Enter	amount
		the name of the bank and the account	here	
		number		

⁵ E.g. inheritance, gifts, allowances, sale of other assets, gratuity, compensation pay-outs.

(iii)	Insurance	Please provide relevant details such as	Enter	amount
	policy	the name of the insurance company and	here	
		the policy number		
(iv)	Investment	Please provide relevant details such as	Enter	amount
	(e.g., stocks,	the name of the company and the	here	
	shares)	number of shares held		
(v)	Property	Please provide relevant details such as	Enter	amount
		the address of the property	here	
(vi)	Other asset(s)	Enter details here	Enter	amount
			here	
	•	TOTAL	Enter	total
			amount	here

3f. Please indicate which options are applicable and provide details where applicable (to the best of your knowledge)

□ P has no outstanding debts or liabilities

 \Box P's debts or liabilities are as follows:

S/N	Type of debt/liability	Particulars of	Amount owed
		debt/liability	
(i)	Loans (secured or	Enter details here	Enter amount here
	unsecured)		
(ii)	Outstanding Bills ⁶	Enter details here	Enter amount here
(iii)	Credit card debt	Enter details here	Enter amount here
(iv)	Court-ordered	Enter details here	Enter amount here
	spousal/child		
	maintenance		
	1	TOTAL	Enter total amount
			here

⁶ E.g. hospital, nursing home.

- 3g. Please indicate which options are applicable and provide details where applicable (to the best of your knowledge)
 - P has not received and is not going to receive any form of compensation or award of damages
 - □ P has received or is going to receive the following compensation or award of damages:

S/N	Nature of claim	Status of claim /	Amount
		proceedings ⁷	
(i)	Enter details here	Enter details here	Enter amount here
(ii)	Enter details here	Enter details here	Enter amount here
		TOTAL	Enter total amount
			here

3h. Lasting Power of Attorney

Please indicate which of the following is applicable.

- □ P made a Lasting Power of Attorney and the Registration No. is: Enter details here
- P made an instrument intended to create a Lasting Power of Attorney but it has not been registered yet
- □ P has not made a Lasting Power of Attorney and, as far as I am aware, P has not made an instrument intended to create a Lasting Power of Attorney

3i. Has P made a will?

 \Box No. \Box Yes. \Box I do not know.

3j. Previous legal applications concerning P

Please indicate which of the following is applicable.

- □ There has been no application or order made relating to P under the Mental Capacity Act 2008 as well as the repealed Mental Disorders and Treatment Act
- ☐ There was an application or order made relating to P under the Mental Capacity Act 2008 or the repealed Mental Disorders and Treatment Act in case no. Enter details here

⁷ E.g. not commenced, pending, concluded, withdrawn, judgment sum ordered / award made.

Section 4: Information about Relevant Persons

Please do not leave any blanks. Please state "Nil" if there is no one in the category in question. If a Relevant Person has passed away, please state the person's name and indicate "(deceased)" after the name. Please list all of P's relatives in the categories set out below even if you are of the view that some or all of them are not, by definition, Relevant Persons. If you feel that certain relatives are not Relevant Persons, please set out your reasons in the space provided below. Use additional rows if required.

4a. The Relevant Persons are:

	Name	NRIC/FIN/Passport	Age
		No.	
Spouse	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Mother	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Father	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Child	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Child	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
4		here	
Sibling	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	
Sibling	Enter name here	Enter	Enter age
		NRIC/FIN/Passport no.	here
		here	

Full name	NRIC/FIN/Passport No.	Age	Relationship to P
Enter name here	Enter NRIC/FIN/PP no. here	Enter age here	Enter details here
Enter name here	Enter NRIC/FIN/PP no.	Enter age here	Enter details here
Enter name here	Enter NRIC/FIN/PP no.	Enter age here	Enter details here

4b. Other Relevant Persons who are likely to have an interest in an application concerning P^8

Section 5: Confirmation

- 5a. I confirm that I am authorised to make this application and the declarations contained herein on behalf of [name of P's hospital / nursing home] and I further confirm that the aforesaid institution undertakes to make the requisite refunds to P in the event of a wrongful payment and/or overpayment.
- 5b. I confirm that the documents exhibited herein and marked are true copies of the originals.
- 5c. Upon the Court declaring that P lacks capacity to make decisions about the matters set out in the Applicant's Form, I seek an order in terms of my application.

Section 6: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024 ("FJ(G)R").

⁸ E.g. persons who have a close relationship with P, persons who have a legal duty to support P, persons who will benefit from P's estate, persons who are responsible for P's care.

Section 7: Supporting Documents⁹

You must attach, with your application, a copy of the documents in Table 7-1 (if applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 7-2.

You may wish to refer to Part 9, Rule 16 of the FJ(G)R for the consequences of not providing the Required Documents.

Table 7-1

Exhibit number	Document Name / Reference in Affidavit to the exhibit (e.g. Paragraph 1 of Section 5)	Page numbers
Supportin	ng Documents (Standard documents)	
Section 3		
E1	Documents relating to P's assets (where available) (e.g. bank statements, CPF statements, CDP statements, insurance documents, title search documents etc.)	Enter page no. here
E2	Documents relating to P's medical / nursing home expenses (e.g. invoices etc.)	Enter page no. here
E3	Office of the Public Guardian search result showing if P has registered a Lasting Power of Attorney	Enter page no. here
E4	Office of the Public Guardian search result showing if there is a past Mental Capacity Act 2008 or Mental Disorders And Treatment Act Order in respect of P	Enter page no. here
E5	Wills Registry search result showing if P has registered a Will	Enter page no. here
Other sup	oporting documents:	
Exhibit No.	Name of document	Page number
E6	Enter name of document here.	Enter page no. here
E7	Enter name of document here.	Enter page no. here

⁹ Use this content page if you have documents as exhibits.

The page numbers for the exhibits should run consecutively from the last page of the affidavit or numbered differently for identification (e.g. E1, E2, E3, if the exhibit page starts as page 1).

If any of the documents listed in Table 7-1 is not provided, complete Table 7-2 in this Section.

E8	Enter name of document here.	Enter page no. here
E9	Enter name of document here.	Enter page no. here
E10	Enter name of document here.	Enter page no. here

(Expand the table if required)

Table 7-2

If any of the Required Document(s) listed in Table 7-1 is not provided, state your reasons below.

State the name of the Required Document not provided	(k) State the reasons for lack of document(l) If alternative document is provided instead, state the alternative document.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

(Expand the table if required)

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the FJ(G)R to be placed between each distinct exhibit.

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E-FORM

P.5, r.8 FJ(G)R 2024

Application Form (Simplified MCA)

Application No.: MCA-APP [number]/[year]

Section 1: Application Details

PERSONAL PARTICULARS

NAME: Enter name here.

ID:	ID TYPE:	D.O.B:	NATIONALITY:
Enter identification no.	NRIC/Other	Enter date here.	Enter nationality here.
here.			

THE APPLICANT IS THE –	□ Spouse
	□ Child
	Parent
	□ Sibling
	Friend
	□ Others: Please specify here.

Is the Applicant a Donee or Deputy for any other person?: \Box No. \Box Yes.

CONTACT INFORMATION

ADDRESS:

Enter address here.

EMAIL:

Enter email address here.

MOBILE TEL NO.: Enter contact no. here.

SOLICITOR INFORMATION (IF ANY)

LAW FIRM:

Enter name of law firm here.

COUNSEL NAME: Enter counsel name here.

Enter counsel name ne

CONTACT NO.:

Enter contact no. here.

EMAIL ADDRESS: Enter email address here.

Section 2: Person who has lost mental capacity

PERSONAL PARTICULARS

NAME: Enter name here.

ID	ID TYPE	D.O.B	NATIONALITY
Enter identification no. here.	NRIC/Other	Enter date here.	Enter nationality here.

Is the Patient residing at an organisation providing residential accommodation? \Box No. \Box Yes.

CONTACT INFORMATION

ADDRESS:

Enter address here.

Section 3: Relevant Person Details

Complete each category. If the category is not applicable, indicate "Nil".

S/N	Name and ID	Relationship ¹	IDOR	('ontact	Consent not obtainable due to
1.	Enter name and ID No. here.	Select option	Enter date here.	Enter contact no. here.	Enter details here.

¹ Available options are: Parents, spouse, child, sibling, other relevant person.

	T				
2.	Enter name and ID No. here.	Select option	Enter dat here.	e Enter contact no. here.	Enter details here.
3.	Enter name and ID No. here.	Select option	Enter dat here.	e Enter contact no. here.	Enter details here.
4.	Enter name and ID No. here.	Select option	Enter dat here.	e Enter contact no. here.	Enter details here.

ADDITIONAL INFORMATION

Enter details here.

Section 4: Orders sought

The Applicant / Applicants applies / apply for the following orders:

- \Box The notification of P of this application be dispensed with.
- \Box The attendance of P at the hearing of this application be dispensed with.
- \Box The service of this application on the relevant persons be dispensed with.
- □ [Name of 1st Applicant] (NRIC No.) and [Name of 2nd Applicant] (NRIC No.) (if applicable) are appointed as deputies to make decisions on behalf of P in relation to the matters set out herein. This appointment will last until further order by the Court.
- □ The deputy / deputies must apply the principles set out in the Mental Capacity Act ("MCA") and have regard to the guidance in the Code of Practice to the MCA.
- □ The deputy / deputies does / do not have authority to make a decision on behalf of P in relation to a matter if the deputy / deputies knows / know or has / have reasonable grounds for believing that P has capacity in relation to the matter.
- □ The deputy's / deputies' authority is limited to making the following decisions on behalf of P:

Enter details here

- The deputy / deputies is / are required to keep a record of any decisions made or acts done for P as well as all relevant documents.
- \Box The deputy / deputies is / are required to do the following:

Enter details here

□ The deputy / deputies is / are to complete and file an annual report relating to P's affairs to the Public Guardian and such further reports as required by the Public Guardian. These reports are to be in such form as may be required by the Public Guardian.

Section 5: Grounds of Application

The grounds of this application are as follows:

Enter details here	

The following medical report is being relied on for this application:

S/N	File Examination Date		Submission Date
1.	Enter details here	Enter date here.	Enter date here.

Section 6: Declaration (Applicant)

I / We, [name of Applicant(s)], confirm the following:

Consents and past applications concerning P

- □ All the Relevant Persons whose consent can be obtained have consented to this application.
- \square P has not registered a Lasting Power of Attorney.
- □ There has not been any past application or order made relating to P under the Mental Capacity Act or the repealed Mental Disorders and Treatment Act.

Duties and responsibilities

- □ I understand my responsibilities if I am appointed as Deputy. In particular, I understand not that I must act with honesty and integrity and ensure that my personal interests do personal conflict with my duty as P's deputy, and I will not use my position for any benefit.
- □ I will have regard to the guidance in the Mental Capacity Act Code of Practice and act in accordance with the principles set out in Section 3 of the Mental Capacity Act. In particular, I will act and make decisions for P in P's best interests.
- □ I will inform the Public Guardian if I have any reason to believe that P no longer lacks capacity and may be able to make his own decisions about the matters for which a deputy is sought to be appointed. I understand that I will not have the power to make ground a decision on P's behalf in relation to a matter if I know or have reasonable for believing that P has capacity in relation to the matter.

Eligibility issues

- □ To the best of my knowledge and belief, I have not been the subject of any formal complaint to the Office of the Public Guardian.
- ☐ I have not been suspended or removed in respect of any appointment as Donee or Deputy for anyone.
- □ I am not an undischarged bankrupt.

I / We, [name of Applicant(s)], confirm and declare that:

 \Box the information in this application form is true and correct to the best of my knowledge, information and belief;

- \Box the scanned copies of the documents submitted herewith are true copies of the originals;
- □ I understand that I commit an offence under section 199 of the Penal Code 1871 if I make, in this application form or any supporting document, any statement which is false, and which I know or believe to be false or do not believe to be true, touching any point material to the object for which this application or supporting document is made or used.

Confirmed and declared by [name of Applicant(s)] on [Enter date here] at [time] \Box am \Box pm.

This application is filed by the Applicant(s) whose particulars are as follows:

[Name of Applicant(s)

Tel. No.: Enter contact no. here.

Email: Enter email address here.

Section 7: Declaration (Solicitor)

I hereby confirm and declare that:

- The identity of the Applicant and the personal particulars stated herein are correct.
- ☐ The Applicant has been informed that the making of a false statement or the provision of false information in this application form is a criminal offence under the Penal Code 1871.

This application is filed by the solicitor for the Applicant(s) whose particulars are as follows:

Enter name of law firm here.

Counsel: Enter counsel name here.

Tel. No.: Enter contact no. here.

Email: Enter email address here.

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P.5, r.8 FJ(G)R 2024

Affidavit for Proceedings under the Mental Capacity Act 2008 (Simplified)

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]¹

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OAM [number]/[year]

Between

Sub Case No. [number]/[year]²

[ID No.]

[Applicant's name]

... Applicant(s)

And

[Respondent's name]

[ID No.]

... Respondent(s)

AFFIDVIT FOR PROCEEDINGS UNDER THE MENTAL CAPACITY ACT 2008 (SIMPLIFIED)

 1.
 Name of maker:
 Enter full name as per NRIC/ Passport here.

 Identity No.:
 Enter NRIC/ FIN/ Passport no. here.

 Address:
 Enter address here.

Enter occupation here.

Occupation:

- 2. I am the Applicant.
- 3. I refer to the application form (which includes all supporting documents) submitted in the electronic filing service as application no. MCA-APP OA [enter case number here].
- 4. I confirm that the contents of the Application are true and correct.

Affirmation

¹ Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

² To insert sub-case details if relevant.

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

66.

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P.5, r.8(4) FJ(G)R 2024

Letter of Objection (Simplified MCA)

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OAM [number]/[year]

Sub Case No. [number]/[year]¹

Between

[ID No.]

... Applicant(s)

And

[Respondent's name]

[Applicant's name]

[ID No.]

... Respondent(s)

LETTER OF OBJECTION (SIMPLIFIED MCA)

То:	Registrar
	Family Justice Courts

Name:Enter full name as per NRIC/ Passport here.Identity No.:Enter NRIC/ FIN/ Passport no. here.Relationship to patient ("P"), [Enter full
name as per NRIC/FIN/Passport here],
[Enter NRIC/Fin/Passport no. here]:Enter relationship here.Date on which I was served with the
application:
Contact details:Enter email address here. (Mandatory)

Enter local correspondence address here.

- 1. I object to the application filed by the Applicant in MCA–APP OA [enter case number here].
- 2. I understand that:

¹ To insert sub-case details if relevant.

- (a) this letter serves only to inform the Court of my intention to object to the application and, where applicable, overrides my past consent to this application.
- (b) for the Court to consider this letter, I must attend in Court at the appointed date and time. In my absence, the Court may make orders on the application without regard to this letter of objection.
- 3. I confirm that the information in this letter is true and correct.

Name: Enter name here. Signature: Date: Enter date here.

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PDF UPLOAD

Generated Summons

The Summons is valid only if engrossed with the seal of the Court and signature of the Registrar

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. Enter sub-case no. here Between

Date of filing: [Date]

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

SUMMONS

¹To the [Responding party / Counsel for the responding party] [Responding party's name / Name of law firm]

¹This summons is fixed for this <u>Court event</u>: [Type of Hearing] on [date] at [time]. You <u>MUST</u> attend the Court event personally unless you are represented by your lawyers. Otherwise, <u>the Court can make orders in your absence</u>.

²This summons is to be determined by Judge / Registrar. Solicitor(s) / parties need not attend unless specifically directed to do so.

The [applying party] applies for:

1.	State the reliefs which you are claiming here.
2.	State the reliefs which you are claiming here.
3.	State the reliefs which you are claiming here.
4.	State the reliefs which you are claiming here (i.e. Costs).

The reasons for the summons are stated in the supporting affidavit.

¹ Applicable if this summons is an application with notice.

² Applicable if the summons is by consent or does not involve a Respondent.

Filed by: [Applying party / Counsel for applying party] [Address of applying party / Address of law firm]

³This is a consent application.

³There is no Respondent in this application.

REGISTRAR FAMILY JUSTICE COURTS SINGAPORE

To the [Responding party / Counsel for the responding party] [Responding party's name / Name of law firm]

If you wish to contest the application, you must:

- e) file an affidavit in reply if you also wish to introduce evidence in this application within 14 days of being served this application and supporting affidavit(s); and
- f) attend at the Family Justice Courts on the date and time shown above (if any). If you do not attend personally or by lawyer, the Court may make appropriate orders.

³ Delete if inapplicable.

67A.

P.2, r.9, r.19, P.3, r.12, r.27, r.31, P.5, r.4, r.13, 15, 19, P.6, r. 6(2), 11, P.14, r.1(3), P.15, r.5(6), r.6(3)(b), P.21, r.1, P.23, r.4, P.24, r.4, P.29, r.2 FJ(G)R 2024 Para 24(3), x4 PD (Part 3C), 71D, 58(2), 59, X, Y, 53(1) (part 7), 83(1) (part 14) PD 2024

Summons / Application

When is this form used?

This form is generally used to apply for interim orders or procedural orders within a main case (i.e. when the main Court case is ongoing). The exception is stated in Part 2, rule 19 of the Family Justice (General) Rules 2024 where a summons to be filed to vary **final** ancillary orders made under Part 10 of the Women's Charter 1961 with the following case prefixes: "OAD", "OADV", "OADTV", "OADT" or "OAF", "OAFV".

In the Family Justice Courts, the main case will be filed either on the eLitigation platform or the iFAMS platform.

Summons vs Application

If your main case is filed in <u>eLitigation</u>, you will select <u>Summons</u> when using this Form. If your main case is filed in <u>iFAMS</u>, you will select <u>Application</u> when using this Form. Please delete the inapplicable references when using this Form.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form when submitted to the Court as Summons, will be generated in accordance with the layout of the generated Summons (Form 67).

E-FORM

Section 1: Application

State the main case number: Enter case number here.

- 1. I am
 - the Applicant in Enter main case number here.
 - the Respondent in Enter main case number here.
 - Enter name or party type here in Enter main case number here.

- 2a. This summons / application is filed against
 - \Box the Applicant
 - □ the Respondent
 - Enter name or party type here.
- 2b. □ There is no responding party in this summons / application.

Notes

If you are filing this into *eLitigation*:

- You may refer to the Originating Application for your party type.
- Please state the OA case number i.e. FC/OAD 1/2022 and not the subcase number.

If your main case is filed in *iFAMS*, you may refer to your main case for your party type.

If the summons / application does not involve another party, you should select option 2b. You can only select option 2b if the Family Justice (General) Rules 2024 allow you to file a summons / application (without notice) for this subject matter. The list of applicable summonses is set out here:

- (a) an application to seek interim orders under Part 3 of the International Child Abduction Act 2010;
- (b) an application to authorise service of a claim for possession of immovable property (P.7, r.5);
- (c) an application for substituted service or dispensation of service (P.7, r.6);
- (d) an application for service out of Singapore (P.7, r.10);
- (e) an application for interim injunction (P.14, r.1);
- (f) an application for enforcement order (P.23, r.2);
- (g) an application for permission to apply for a committal order (P.24, r.3);
- (h) an application to include a new ancillary

PART A

I am applying for:

- 1. State the reliefs which you are claiming here.
- 2. State the reliefs which you are claiming here.
- 3. State the reliefs which you are claiming here.

PART B

- 4. Costs of this summons / application
 - \Box Costs in the cause.
 - \Box No orders as to costs.
 - \Box Each party to bear own costs.
 - Costs to be paid by Enter name or party type here.
 - Costs to be reserved to Enter event here.

 \Box Others:

Enter details here.

- 5a. □ The reasons / evidence for this summons / application are stated in the supporting affidavit.
- 5b. □ The summons / application is filed without a supporting affidavit. I will refer to the following affidavits to support this summons / application:

.

Person who filed the affidavit	Date of filing	
Enter details here.	Enter date here.	
Enter details here.	Enter date here.	
Enter details here.	Enter date here.	

PART C (Only applicable for iFAMS cases)

claim after final ancillary orders are made (P.2, r.19).

Costs in the cause means the costs of this summons / application will be decided at and will depend on the outcome of the main proceedings.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

You may use the Generic Affidavit Form (Form 54).

The Application is to be declared in accordance with the Form of Declaration (Form 107) of the Family Justice (General) Rules 2024.

If you are not represented by a lawyer, you may make a declaration in accordance with the Form of Declaration (Form 107) of the Family Justice (General) Rules 2024 or swear / affirm this document in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

¹This summons / application will be generated with the information below:

If you wish to contest the application, you must:

- a) file an affidavit in reply if you also wish to introduce evidence in this application within 14 days of being served this application and supporting affidavit(s); and
- b) attend at the Family Justice Courts on the date and time shown above (if any). If you do not attend personally or by lawyer, the Court may make appropriate orders.

¹ Not applicable if the summons/application is without notice, i.e. there is no responding party.

68.

E-FORM

Originating Application for Orders under Section 8 / 14 of the International Child Abduction Act 2010

This Form is used to apply for orders under sections 8 and 14 of the International Child Abduction Act 2010.

This Form contains Notes to help you in the completion of the form. Please note that the Notes are \underline{NOT} to be construed or regarded as a substitute for legal. Please seek legal advice if necessary.

This form, when submitted to the Court, will be generated in accordance with the layout of the generated Originating Application (Form 53).

This Notice serves as a reminder to the Applicant and does not appear as part of the issued Originating Application ("OA").

IMPORTANT: Duty to consider amicable resolution

Pursuant to the Family Justice (General) Rules 2024 ("FJ(G)R 2024"), you are required to consider amicable resolution of the dispute before and after commencing Court proceedings. This means that you should either:

- g. explore alternative ways of settling the dispute without resorting to legal action; or
- h. make an offer to the other party to settle the dispute.

For more information on your obligations, please refer to the Information Sheet on Amicable Dispute Resolution and Part 4 of the FJ(G)R 2024.

Section A: Details of Application

Please use Section A1 to A4 (where applicable) in the Originating Application: Generic Sections (Form 53B) to provide the details of application.

Section B: The Parties

Please use **Section B** in the **Originating Application: Generic Sections (Form 53B)** to provide the Parties' information.

Section 1: My Application

I am applying for:

Part A: For return of child (Section 8 of the Act)

- 1. <u>Enter full name of child as per NRIC/Passport here</u> be returned to the child's place of habitual residence which is <u>Enter country here</u>.
- □ The Enter party type or name of person here hand over the child to □ the Applicant □ his representative Enter name of representative here □ Enter name here within Enter number here days from the date of this order.
- 2A. \Box together with the child documents below.
- 3. \Box The child documents are:
 - □ Child's passport

□ All relevant travelling documents to facilitate the return of the child.
□ [Others]

Part B: For declaration of wrongful removal of the child (Section 14 of the Act)

 A declaration that the
 □ removal of Enter full name of child as per NRIC/Passport here from Singapore
 □ retention of Enter full name of child as per NRIC/Passport here outside Singapore

> was wrongful within the meaning of the Convention on the Civil Aspects of the International Child Abduction.

> > 2

Notes

Part C: Applicable for all applications

- 5. [State any other reliefs which you are claiming here.]

Part D: Costs (Applicable for all applications)

- 7. Costs of this application
 - \Box No orders as to costs.
 - \Box Each party to bear own costs.
 - \Box Costs to be paid by
 - Enter name or party type here.
 - Costs to be reserved to Enter event here.

 \Box Others:

Enter details here.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

Affidavit

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

- 1. I am the Applicant.
- 2. This affidavit is in support of my application.
- 3. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

Section 2: Statement

For easy reference, number each paragraph and sub-points clearly. Use headers or titles to identify different issues. If you have any exhibits or supporting documents, you may include them in <u>Section 5</u>.

PART A: Details of Child

- 4. The child, <u>Enter full name of child as per NRIC/Passport here</u>, was born on <u>Enter</u> <u>date here</u>.
- 5. The child's habitual residence immediately prior to the removal or retention of the child was <u>Enter country here</u>, a convention country.
- 6a. \Box The child has been wrongfully removed from <u>Enter country here</u>.
- 7. The child is now residing with <u>Enter name here</u>, <u>Enter relationship to child here</u> at this address <u>Enter address here</u>.

PART B: Details of Parties

8. The parties' details and their relationship to the child are set out:

Applicant		
Name (as in ID / passport)	Enter full name here.	
Identity number / Passport	Enter ID / passport number here.Country which issued ID /passport:Enter country here.	
Citizenship	Enter citizenship here.	
Country of residence and Address	Enter country of residence and address here.	
Relationship with the child	 Parent Legal guardian Date of court order of appointment: Enter date here. Others. Please state: Enter relationship here. 	

Respondent

(If there is more than 1 Respondent, please provide the information in an additional table.)

Name (as in ID / passport)	Enter full name here.		
Identity number / Passport	Enter ID / passport number here.	Country which issued ID / passport:	Enter country here.
Citizenship	Enter citizenship here.		
Country of residence and Address	Enter country of residence and address here.		

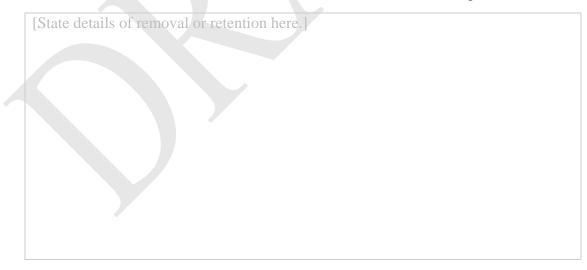
Relationship with the	□ Parent
child	□ Legal guardian
	Date of court order of appointment: Enter date here.
	\Box Others.
	Please state: Enter relationship here.

PART C: Details concerning Child's Custodian

9. The Applicant has rights of custody in respect of the child by reason of the following factual and legal circumstances:

[State details of any custody order here.]

10. The child was removed or retained on <u>Enter date here</u> in the following circumstances:



11. \Box There are <u>NO</u> pending or concluded Court proceedings anywhere in the world relating to the child.

 \Box There are pending and/or concluded Court proceedings relating to the child either in Singapore or elsewhere in the world. The details are:

In Singapore:

No.	Case number	Status (Pending / Concluded)	If pending, any orders made? If yes, state the orders.	If pending, date of next Court event. If concluded, outcome of case, ie. orders made.
1.	Enter case no. here.	Enter status here.	Enter details here.	Enter details here.
2.	Enter case no. here.	Enter status here.	Enter details here.	Enter details here.

Overseas:

Cour	Country in which the Court proceedings are filed: Enter country here.			
No.	Case number	Status (Pending / Concluded)	If pending, any orders made? If yes, state the orders.	If pending, date of next Court event. If concluded, outcome of case, ie. orders made.
1.	Enter case no. here.	Enter status here.	Enter details here.	Enter details here.
2.	Enter case no. here.	Enter status here.	Enter details here.	Enter details here.

If the child has been removed or retained for more than 12 months (applicable only for Section 8 applications)

12. The child was removed or retained more than 12 months ago. The reason for the delay in this application is as follows:

[State reasons here.]

Requests (to Central Authority / from judicial / administrative authorities)

13A. I have filed with the Central Authority of Singapore the request for the return of the child.

Use this statement if your application is under Section 8 of the Act.

13B. I have a copy of the request made by the requesting judicial or administrative authorities referred to in Article 15 of the Hague Convention.

Use this statement if your application is under Section 14 of the Act.

Undertaking

14. I hereby undertake to serve a copy of my application and all orders made pursuant to my application on the Central Authority of Singapore.

Documents

15. The documents in support of this application are attached.

Section 3: Summary of Claim

I am asking that the Court \Box grants my application \Box dismisses the summons / application filed by [Enter the other party's name or party type here].

[Enter relief(s) claimed here.]

Section 4: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 5: Exhibit Content Page

You must attach, with your application, a copy of the documents in Table 5-1 (if applicable) and all documents which you intend to rely on to support your position (collectively "Required Documents").

If you are unable to provide the Required Documents, you must explain the lack of documents in Table 5-2.

You may wish to refer to Part 9, Rule 16 of the Family Justice (General) Rules 2024 for the consequences of not providing the Required Documents.

Table 5-1

Exhibit number	Reference in Affidavit to the exhibit (<i>e.g. Paragraph 1 of Section A2</i>)	Page numbers	<u>Notes</u> Use this content page if y
E 1	Child's identification documents, e.g. Birth Certificate	Enter page no. here.	have documents as exhibits The page numbers for t exhibits should r
E2	(For application under Section 8 of the Act) Request filed with the Central Authority of Singapore	Enter page no. here.	consecutively from the la page of the affidavit numbered differently j identification, eg. E1, E2, the exhibit page starts page 1.
E3	(For application under Section 14 of the Act) Certified copy of request made by the requesting judicial or administrative authorities	Enter page no. here.	Use additional rows required.
E4	Certified copy of relevant order or judgment concerning rights of custody, care and control (if any)	Enter page no. here.	
E5	Certified copy of any relevant agreement relating to the custody of the child (if any)	Enter page no. here.	
E6	Certificate as to the applicable law (if any)	Enter page no. here.	
E7	Enter details of paragraph/section in which the exhibit relates to.	Enter page no. here.	
E8	Enter details of paragraph/section in which the exhibit relates to.	Enter page no. here.	
E9	Enter details of paragraph/section in which the exhibit relates to.	Enter page no. here.	
E10	Enter details of paragraph/section in which the exhibit relates to.	Enter page no. here.	

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Table 5-2

If any of the Required Document(s) listed in Table 5-1 is not provided, state your reasons below.

Use additional rows if required..

State the name of the Required Document no provided	
Enter details	Enter details here.
	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.
Enter details here.	Enter details here.

Please ensure that you have completed all relevant fields and attached all required documents. If there are missing information or documents, the Court may subsequently require you to provide these information or documents. You may incur additional fees as a result.

The exhibits are to be attached from this page onwards.

The exhibit cover page in accordance with the Generic Affidavit (Form 54) of the Family Justice (General) Rules 2024 to be placed between each distinct exhibit.

69.

PDF UPLOAD

Para 30 PD 2024

Cover Letter for Submission of Original Birth Certificate in Adoption Proceedings

To: OFFICER-IN-CHARGE ADOPTION SECTION

ADOPTION ORIGINATING APPLICATION NO. [number]/[year]

Please find enclosed the original birth certificate of the child in the above matter.

2 The matter has been fixed for hearing as follows:

Date: Enter date here. Time: Enter time here.

Signed by:

Name of Solicitor for the Applicant: Enter name here. Name of Law Firm: Enter name here. 70.

PDF UPLOAD

Para 2 PD (Part 4D) 2024

Statement (For Determination or Declaration of Parenthood)

This Form is to be included in an application for the determination or declaration of parenthood under the Status of Children (Assisted Reproduction Technology) Act 2013.

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application No. FC/OA [number]/[year] Between

Sub Case No. [number]/[year]¹

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

 \dots Respondent(s)²

Section 1: Statement

1. Particulars of Applicant:

(a)	Name:	Enter name here.
(b)	Nationality:	Enter nationality here.
(c)	Race:	Enter race here.
(d)	Dialect group:	Enter dialect group here
(e)	Date of birth:	Enter date of birth here.
(f)	Country/Place of birth:	Enter country/place of birth here.
(g)	Singapore NRIC	Enter NRIC/passport no. here.
(8)	No./Passport No. ³ :	
(h)	Residential address:	Enter residential address here.
(i)	Occupation:	Enter occupation here.

¹ To insert sub-case details if relevant.

² To include if applicable.

³ Passport number to be stated where person is not a citizen or permanent resident of Singapore.

2. Particulars of person (other than Applicant) who is treated or claiming to be treated as parent of the relevant child⁴:

(a)	Name:	Enter name here.
(b)	Nationality:	Enter nationality here.
(c)	Race:	Enter race here.
(d)	Dialect group:	Enter dialect group here
(e)	Date of birth:	Enter date of birth here.
(f)	Country/Place of birth:	Enter country/place of birth here.
(g)	Singapore NRIC	Enter NRIC/passport no. here.
(8)	No./Passport No. ⁵ :	
(h)	Residential address:	Enter residential address here.
(i)	Occupation:	Enter occupation here.

3. Where section 9 of the Status of Children (Assisted Reproduction Technology) Act 2013 applies, particulars of person whose egg, sperm or embryo was used in the fertilisation procedure undergone by gestational mother by reason of any mistake, negligence, recklessness or fraud⁶:

(a)	Name:	Enter name here.
(b)	Nationality:	Enter nationality here.
(c)	Race:	Enter race here.
(d)	Dialect group:	Enter dialect group here
(e)	Date of birth:	Enter date of birth here.
(f)	Country/Place of birth:	Enter country/place of birth here.
(g)	Singapore NRIC	Enter NRIC/passport no. here.
(8)	No./Passport No. ⁷ :	
(h)	Residential address:	Enter residential address here.
(i)	Occupation:	Enter occupation here.

4. Particulars of gestational mother of the relevant child⁸:

(a) Name:

Enter name here.

⁴ To fill in particulars if known.

⁵ Passport number to be stated where person is not a citizen or permanent resident of Singapore.

⁶ To fill in particulars if known.

⁷ Passport number to be stated where person is not a citizen or permanent resident of Singapore.

⁸ To fill in particulars if known.

(b)	Nationality:	Enter nationality here.
(c)	Race:	Enter race here.
(d)	Dialect group:	Enter dialect group here
(e)	Date of birth:	Enter date of birth here.
(f)	Country/Place of birth:	Enter country/place of birth here.
(g)	Singapore NRIC	Enter NRIC/passport no. here.
(8)	No./Passport No. ⁹ :	
(h)	Residential address:	Enter residential address here.
(i)	Occupation:	Enter occupation here.

Particulars of relevant child¹⁰: 5.

(a)	Name:	Enter name here.
(b)	Date of birth:	Enter date of birth here.
(c)	Gender	□ Female □ Male
(d)	Country/Place of birth:	Enter country/place of birth here.
(e)	Time of birth:	Enter time here, e.g. 10.45 AM PM
(f)	Birth registration no.:	Enter birth registration no. here.

⁹ Passport number to be stated where person is not a citizen or permanent resident of Singapore. ¹⁰ To fill in particulars if known.

Para 50 PD 2024, Third Schedule, Part 1, Division 4, Item 15 FJ(G)R 2024

Notice of Proceedings to Respondent / Co-Respondent / Named Person¹/ Relevant Person²/ Non-party who has been served (General)

THIS DOCUMENT REQUIRES YOUR IMMEDIATE ATTENTION

You may wish to seek legal advice upon receiving this document.

1.	An application for [nature of application] has been presented to the Court. A sealed copy of the application is delivered with this Notice.	<u>Notes</u>
2.	To acknowledge that you have received this document, please complete the <u>Acknowledgment of Service</u> (Form 77) and return to the address stated in paragraph 6.	You may also file the Acknowledgement of Service (Form 77) in Court.
If you	<u>oppose</u> the application proceed to paragraph 3	
	<u>consent</u> to the proceed to paragraph 5 application	
То ор	pose the application	
3.	If you <u>oppose</u> the application, you <u>must</u> file the following document(s) in Court:	If you oppose the issue of costs only, you do not need to file the documents in
	 a. [reply affidavit within <u>14 days</u> (if you received this application in Singapore) or within <u>28 days</u> (if you received this application outside of Singapore).] [Option (a) to be used in all applications except: (i) an application for dissolution of marriage; 	paragraph 3. Instead, you should submit the Acknowledgment of Service (Form 77) and inform the Court at the next Court hearing.
	(ii) (ii) application under the International Child Abduction Act 2010 ("ICAA").]	<i>For options 3(a) to (c)</i> <i>If you challenge the</i> <i>jurisdiction of the Singapore</i>
	b. [reply affidavit within <u>14 days</u>] [Option (b) to be used only in ICAA applications.]	Court to deal with this application, you must file a summons within the same

time-frame for a Reply / reply

affidavit.

E-FORM

¹In an Originating Application for Dissolution of Marriage

² In an Originating Application for orders under the Mental Capacity Act 2008 / Originating Application for orders under the Mental Capacity Act 2008 (Variation, rescission, setting aside) / Originating Application for Mental Capacity Act 2008 Orders (General).

	<u>28 days</u> .]	n <u>14 days</u> AND Reply within an application for dissolution	For option 3c, you must also file the Notice to Contest if you intend to challenge the jurisdiction of the Singapore Court.
	· · · · · · · · · · · · · · · · · · ·	t within <u>28 days</u>] n an application for financial ce or disposition of assets after	
	within <u>14 days</u> .]	as a party to the proceedings apply to a Co-Respondent or a	Option 3(e) is only applicable if you are neither a party nor a Named Person in the action.
4.	time-frame, the Court may,	ent(s) in paragraph 3 within the without notice to you, proceed nake orders in your absence.	All timelines start running from the day after you receive this application. If the timeline ends on a non- working day, the last day to file the document is the next working day.
To co	nsent to the application		
5a.		blication, sign the applicable oner for Oaths, Notary Public ised to administer oaths:	
	For Mental Capacity Act 2008 proceedings	Consent (Mental Capacity Act 2008) in Form 108B	
	For Adoption proceedings	a) <u>Consent (Relevant</u> <u>Person);</u> or	If you are a relevant person as defined in section 2 of the Adoption of Children Act 2022. Applicable only for Originating Application of Child applications. For all other adoption-related applications, please use Consent (General) (Form 108A).
		ii) <u>Consent (General)</u> in Form 108A	If you are <u>not</u> a relevant person.
	For all other proceedings	<u>Consent (General)</u> in Form 108A	
5b.	Return the signed form in 5	a to the party / party's lawyer	

in paragraph 8 below.

To offer to settle the claim

5c. You may consider sending the other party an <u>Offer of</u> <u>Amicable Resolution</u> (Form 50).

If you wish to engage a lawyer

6. If you intend to instruct a lawyer to act for you, you should at once give him all the documents which have been served on you, so that he may complete the relevant forms on your behalf within the time specified above.

Submission (Filing) of documents to Court

7.	To file a do	locument in Court, please attend at	
	CrimsonL	ogic Service Bureau	
	Address:	State Courts Tower No. 1 Havelock Square	
		Level 2, Singapore 059724	
	Tel:	65389507	
	Opening	Monday to Friday:	
	Hours:	8:30am – 12:30pm, 2:00pm – 5:00pm	
		Saturday: 8.30am - 12.30pm	
		Closed on Sunday and Public Holidays	

8. All documents which you file in Court <u>must</u> be served on all other parties at the same time. The address(es) for service is / are:

Enter party type(s) and address(es) here.

If the other party is represented by a lawyer, you may opt to serve the document through CrimsonLogic.

71**B**.

E-FORM

Notice of Proceedings to Respondent / Co-Respondent / Named Person¹ (Simplified Divorce / Simplified Judicial Separation)

Case No.: Filed: (Title as in action)

Hearing Date: Hearing Time: Hearing Type: Attend Before: (Details will be included in the generated Form)

THIS DOCUMENT REQUIRES YOUR IMMEDIATE ATTENTION

You may wish to seek legal advice upon receiving this document.

1.	An application for an order for [Simplified Divorce / Simplified Judicial Separation] has been presented to the Court. A sealed copy of the application is delivered with this Notice.	<u>Notes</u>
1b.	This application is filed as you have consented to the dissolution of marriage [and the ancillary matters].	
2.	The hearing date is scheduled as above. TAKE NOTICE that the hearing of this application may proceed on the scheduled date without any action on your part.	
3.	If you <u>oppose</u> the application, you <u>must</u> file the Notice to Contest (Form 4) <u>IMMEDIATELY</u> and at least <u>5</u> <u>working days</u> before the hearing date.	
4.	If you do not file the document(s) in paragraph 3 within the time-frame, the Court may, without notice to you, proceed to hear the application and make orders in your absence.	All timelines start running from the day on which this application is filed. If the timeline ends on a non- working day, the last day to file the document is the next working day.
5.	If you intend to instruct a lawyer to act for you, you should at once give him all the documents which have been served	If the other party is represented by a lawyer, you may opt to serve the

¹In an Originating Application for Dissolution of Marriage

on you, so that he may complete the relevant forms on your behalf within the time specified above.
To file a document in Court, please attend at CrimsonLogic Service Bureau Address: State Courts Tower No. 1 Havelock Square, Level 2, Singapore 059724
Tel: 65389507
Opening Monday to Friday:

Opening	Monday to Friday:
Hours:	8:30am – 12:30pm, 2:00pm – 5:00pm
	Saturday: 8.30am - 12.30pm
	Closed on Sunday and Public Holidays

7. All documents which you file in Court <u>must</u> be served on all other parties at the same time. The address(es) for service is / are:

Enter address here.

6.

Email:

Notice of Proceedings to Relevant Person¹ (Organisation) who has been served

THIS DOCUMENT REQUIRES YOUR IMMEDIATE ATTENTION

You may wish to seek legal advice upon receiving this document.

1.	An application for [nature of application] has been presented to the Court. A sealed copy of the application is delivered with this Notice.	<u>Notes</u>
2.	You are named as a Relevant Person as you provide residential accommodation to the patient ("P") in this application.	
3a.	If you have relevant information regarding P, you may submit a report to the Court through your representative. To do so, follow steps $A - B$ below.	
	A. Write to the Family Justice Courts within <u>8 days</u> of service to inform of your intention to submit a report.	All timelines start running from the day after you receive this application. If the
	 B. Submit a report to the Family Justice Courts within <u>14</u> <u>days</u> of service. 	timeline ends on a non- working day, the last day to file the document is the next working day.
3b.	If you submit a report, the Court may require the report writer to attend the Court hearing.	
	In such a case, you will be notified by letter.	
3c.	If you require more time to submit the report, you may write to the Court with your request.	
Writi	ng to Court	
4.	To write to Court, please send the correspondence or document to:	

¹ In an Originating Application for orders under the Mental Capacity Act / Originating Application for orders under the Mental Capacity Act (Variation, rescission, setting aside) / Originating Application for Mental Capacity Orders (General).

FJC_MAINTPOS@judiciary.gov.sg

E-FORM

Annex A

Registrar Family Justice Courts Enter address or email address here.

Case number: OSM / OAM No. [number] / [year] Name of Applicant: Enter full name here. Name of Respondent: Enter full name here. Name of Patient ("P"): Enter full name here.

Select options A or B as required.

Option A

Notice of intention to submit report

We received the application in relation to P on [Enter date here].

This serves to inform the Family Justice Courts ("FJC") that we intend to submit a report on P.

We understand that the report is to be submitted to the FJC within 14 days from the date in paragraph 1. \Box We require an extension of time to submit the report to the FJC.

The report will be forwarded to the FJC by [Enter date here].

Option B

Submission of report

We refer to our Notice of intention to submit report dated [Enter date here].

We enclose the report on P dated [Enter date here].

Enter name of representative here. Enter name of organisation here. Enter date here.

71D.

Para xx PD 2024

Notice to Relevant Person¹ served (Simplified proceedings under Mental Capacity Act 2008)

[Form will be auto-generated with completed Originating Application]

THIS DOCUMENT REQUIRES YOUR IMMEDIATE ATTENTION

You may wish to seek legal advice upon receiving this document.

1.	An application for an order under the Mental Capacity Act 2008 (simplified proceedings) has been presented to the Court. A sealed copy of the application is delivered with this Notice.	<u>Notes</u>
If you	opposethe applicationproceed to paragraph 3consentto the applicationproceed to paragraph 5	
То ор	pose the application	
3.	If you oppose the application, you must inform the Court by submitting the Letter of Objection (Form 66) as soon as possible and within 7 days from receiving the application. To file the Letter of Objection, you may log-in to https://ifams.gov.sg/ with your Singpass and follow the steps. If you do not file the document(s) in paragraph 3 within the time-frame, the Court may, without notice to you, proceed to hear the application and make orders in your absence.	 To oppose the application means (a) withdrawing your consent to this application OR (b) to object to the application although you had not given any consent. All timelines start running from the day after you receive this application. If the timeline ends on a nonworking day, the last day to file the document is the next working day.
To cor	esent to the application	
5.	If you consent to the application, refer to the <u>Consent</u> (<u>Mental Capacity Act</u>) (Form 108B) and follow the steps for <u>Simplified Proceedings under the Mental Capacity Act</u> 2008.	

¹ In an application for orders under the Mental Capacity Act 2008 / Originating Application for orders under the Mental Capacity Act (Variation, rescission, setting aside) / Originating Application for Mental Capacity Orders (General).

To offer to settle the claim

5a. You may consider sending the other party an <u>Offer of</u> <u>Amicable Resolution</u> (Form 50).

Submission (Filing) of documents to Court

- 6. To file a document in Court, please log-in to <u>https://ifams.gov.sg/</u> with your Singpass and follow the steps.
- 7. All documents which you file in Court <u>must</u> be served on all other parties at the same time. The address(es) for service is / are:

Enter address here.

72.

E-FORM

Notice of Proceedings (Advertisement)

To: [Name and ID number of person to be served]

 □ [A summons [case number] / [name of document¹]] in Originating Application No. [case number]

□ An Originating Application No. [case number]

has been filed in Court by [name]. You are the [party type of the person to be served] in these proceedings.

- 2. The Court has ordered that service of the document on you be effected by this advertisement. If you oppose this action, you must file the
 - □ Notice to Contest within <u>14 days</u> AND Reply within <u>28 days</u>.
 - □ Reply Affidavit within <u>14 days</u> (if you received this application in Singapore or received an application for orders under the International Child Abduction Act 2010).
 - \square Reply Affidavit within <u>28 days</u> (if you received this application outside of Singapore).
 - □ First Ancillary Affidavit within <u>28 days</u> (if the application is for financial relief orders / disposition of assets).
 - □ Others: Enter details here

from the publication of this advertisement.

- 3. If you do not file the document(s) within such time, the Court may, without notice to you, proceed to hear the application and make orders in your absence.
- 4. To file a document in Court, you must attend at the CrimsonLogic Service Bureau. Details can be found at <u>www.crimsonlogic.com</u>.

Contact particulars of [name of filing party] / [filing party]'s solicitors Name of solicitor: Enter name here Firm name²: Enter firm name here Address: Enter address here Telephone Number: Enter telephone number here File Reference Number²: Enter file reference number here

¹ If you are filing the Notice of Proceedings (Advertisement) for service of court documents other than an Originating Application or a summons in an Originating Application, please complete this form and upload as PDF.

² Only applicable for lawyers.

P.6, r.10 FJ(G)R 2024

73.

E-FORM

Consent to act as Litigation Representative

(Title as in action)

CONSENT TO ACT AS LITIGATION REPRESENTATIVE

For the **Litigation Representative**'s completion.

My name: <u>Enter full name as per NRIC/Passport here.</u> My identification number: <u>Enter NRIC/ FIN/ Passport no. here.</u>

I consent to act as the litigation representative for

the Applicant: Enter full name as per NRIC/Passport here

□ the Respondent: Enter full name as per NRIC/Passport here

□ others: Enter full name as per NRIC/Passport here

in: State case no. or describe the proceedings if the proceedings have not commenced.

I authorise <u>Enter name of law firm here</u> of <u>Enter law firm's address here</u>, advocates and solicitors, to act on my behalf.

The Consent is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

P.6, r.10 FJ(G)R 2024

74.

E-FORM

Certificate by Solicitor Acting for Litigation Representative

(Title as in action)

CERTIFICATE BY SOLICITOR ACTING FOR LITIGATION REPRESENTATIVE

I, <u>Enter name here</u> of <u>Enter law firm here</u>, counsel for <u>Enter name of litigation representative</u> <u>here</u>, the litigation representative, hereby certify that I know (or believe) that:

(a) *State the party's disability.*

□ The party is below 21 years old.□ The party lacks mental capacity.

(b) State the reasons for your belief in (a).

□ I have the evidence of the party's date of birth.
□ I have a medical report which states the party's incapacity.
□ Others: Please state reasons here.

- (c) Does the litigation representative have any adverse interest to the party?
 - \Box No.

 $\hfill Yes.$ The litigation representative cannot conduct the proceedings on behalf of the party. 1

Х

Signed by the abovenamed

Counsel for the Enter party type here.

Enter counsel's name, address, email address and telephone number here. Date: Enter date here.

¹ If you selected "yes", you should not file this Certificate.

75.

E-FORM

Notice of Change of Representation

When can you use this Form?	Unrepresented party	Lawyer
Appoint a new lawyer	No	Yes
Replace the current lawyer with a new lawyer	No	Yes (only if you are the new lawyer)
Discharge the current lawyer	Yes	 No, unless: a) you have an Order of Court discharging the lawyer OR b) you are filing this Form on behalf of your client. To do so, you need to include a letter of authorisation from your client.

This Form will serve as a Notice to inform all parties of the change.

- a) Use a **<u>separate Form</u>** for each main case (including cross-applications).
- b) To change the representation of a party, select **<u>that</u>** party as the filing party.

Only for Originating Applications for Divorce, Judicial Separation or Nullity to which there is a cross-application:

If you are a co-Respondent in 1 case (e.g. OA 2), you must file this Form in both the Originating Application (e.g. OA 1) and the cross-application (e.g. OA 2) to have access to both cases. To file this Notice in OA 1 (i.e. the case in which you are not an active party in), you may select 'Co-Respondent in cross-application' ("co-R(x)") as the filing party.

1. State the case number(s): Enter case number(s) here.

- 1A State the filing party:
 - □ Applicant
 - □ Respondent
 - \Box Co-Respondent
 - □ Co-Respondent in Cross-Application (co-R(x)): Enter case number here.
 - □ Named Person

□ Non-party: Enter full name of the Non-Party here.

2. Who is using this Form?

\Box I am a party.	□ I am a lawyer.
My NRIC/FIN/passport number (mandatory) Enter NRIC/ FIN/ passport number	Name of lawyer Enter name of lawyer here.
here. My name (as stated in NRIC/Passport) (mandatory)	Name of law firm (mandatory) Enter name of law firm here.
Enter full name as per NRIC/Passport here.	

3. Is there a current lawyer for the party?

□ No. A new lawyer is to be appointed. *Proceed to <u>question 5</u>*.
□ Yes. *Proceed to <u>question 4</u>*.

4. The current lawyer is to be replaced with a new lawyer. *Proceed to question 5*.

\Box The current lawyer is to be discharged.

(The party is to represent him/herself).

Mandatory

a) If you are a lawyer discharging yourself from acting for your client,

- (i) please state the date on which the Court has made an order for the lawyer to be discharged: <u>Enter date here.</u> OR
- (ii) please attach a letter of authorisation from your client.

b) If you are discharging the lawyer acting for the other party,

(i) please state the date on which the Court has made an order for the lawyer to be discharged: Enter date here.

Proceed to *question 6.*

5. **Details of new lawyer**

Name of lawyer

Enter name of lawyer here.

Name of law firm (mandatory)

Enter name of law firm here.

Lawyer's address and email address

Enter lawyer's address and email address here.

Lawyer's contact number(s)

You must provide at least one contact number.Enter mobile number here.(Mobile)Enter number here.(Direct line)

6. <u>This question is applicable only if the party is to represent himself/herself.</u>

The party's information

The information shown below will be generated from the party details in the Court records. The details may be updated in the fields below.

The contact information in eLitigation is accurate.

 \Box Yes.

\Box No. The party's updated contact information is below:

You must provide at least one contact number.

Enter mobile number here.

(Singapore mobile number)

Enter number here.

(Singapore residential number)

 \Box I do not have a Singapore contact number.

You must provide either a Singapore address or your email address.

Enter email address here.

(Email)

Address (in Singapore)

Provide the address at which you can receive Court notices. P.O. Boxes are not acceptable. Enter address here.

Filing Date of Notice:

Enter date here.

Filed by:

Name of party / Name of law firm

This Notice is to be served on:

□ Current lawyer in:	Enter case numbers here.	
□ Other party's lawyer	in: Enter case numbers here.	
\Box Other party in:	Enter case numbers here.	
\Box Previous client in:	Enter case numbers here.	

\Box There is no future Court event.

\Box The **<u>next Court event</u>** is:

Date and time:	Enter date and time here.	
Location:	Enter location here.	
Nature of Court	event: Enter event here.	

If your lawyer is discharged, you must personally attend the Court event. The Registrar's Notice is attached.

P.6, r.16(2) FJ(G)R 2024

Summons for Discharge of Solicitor

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

Section 1: Application

- 1. I am
 - the lawyer for the Enter name or party type here.
 - the Applicant in Enter main case number here.
 - the Respondent in Enter main case number here.
 - Enter name or party type here in Enter main case number here.
- 2. This summons is filed against
 - \Box the Applicant
 - \Box the Respondent
 - □ Enter name or party type here.

PART A

1. I am applying for:

Enter the name of law firm here to cease acting as the lawyer for Enter full name of the party and his/her party type here in this action.

- 2. State the reliefs which you are claiming here.
- 3. State the reliefs which you are claiming here.

PART B

Notes

You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

If you are filing this application to discharge the other party's lawyer, select the other party so that he may have the opportunity to respond.

1

4. Costs of this summons

- \Box Costs in the cause.
- \Box No orders as to costs.
- \Box Each party to bear own costs.
- Costs to be paid by

Enter name or party type here.

Costs to be reserved to Enter event here.

 \Box Others:

Enter details here.

Costs in the cause means the costs of this application will be decided at and will depend on the outcome of the main proceedings.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

The reasons for this summons are stated in the supporting affidavit.

Affidavit

Section 1: Affidavit

Name of maker:	Enter full name as per NRIC/ Passport
	here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

1a. I am

- the lawyer for the <u>Enter name or party type here</u>.
- the Applicant in Enter main case number here.
- the Respondent in Enter main case number here.
- Enter name or party type here in Enter main case number here.
- 1b. This affidavit is in support of the summons.
- 1c. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

<u>Notes</u>

You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

Section 2: Statement

- 1. Complete question 1 only if you are making an application to discharge the other party's lawyer. Otherwise, skip to question 2.
 - □ I am making this application because <u>Enter full name of the</u> <u>lawyer here</u>, the lawyer acting for <u>Enter name of the other</u> <u>party and his/her party type here</u> ("the party") in this action,

 \Box has died

 \Box has become bankrupt

 \Box cannot be found

□ has failed to take out a practising certificate

- \Box has been struck off the roll of solicitors
- □ has been suspended from practising

 \Box Others:

Enter details here

Enter details here.

and the party has not given notice of change of representation.

2. I set out the reasons for my summons/statement:

For easy reference, number each paragraph and subpoints clearly. Use headers or titles to identify different issues.

If you have any exhibits or supporting documents, you may include them in <u>Section</u> <u>5</u>.

Notes

You must exhibit the supporting document(s) or evidence (if any) to support this statement.

Section 3: Summary of Claim

□ I am asking that □ the Court grants my summons

 \Box Others:

Enter details here.

Section 4: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 5: Supporting Documents

Please refer to the Generic Affidavit (Form 54) for the exhibit content and cover pages to be included in your affidavit (where applicable).

Notes

P.7, r.3 FJ(G)R 2024

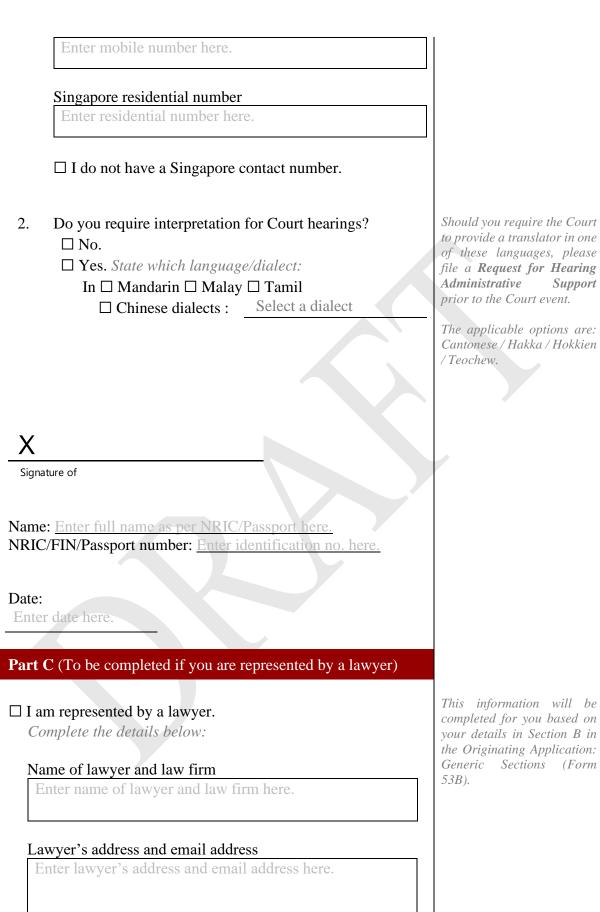
Acknowledgment of Service

State the main case number: Enter main case number here. Notes Part A I received the following documents: □ Originating Application □ Affidavit □ Others: List other document(s) here. When did you receive the documents? Enter date here. I received the documents \Box in Singapore \Box outside Singapore. Proceed to: Part B if you are acting in-person (i.e. do not have a lawyer representing you). *Part C* if you are represented by a lawyer. **Part B** (To be completed if you are acting in-person) 1. This information will be I can receive correspondence at: completed for you based on You must provide either a Singapore address or your eyour details in Section B in mail address. the Originating Application: Generic Sections (Form 53B). Provide the address at which Address (in Singapore) you can receive Court Enter address here notices. P.O. Boxes are not acceptable. Email Enter email address here. **Contact Number(s)**

You must provide at least one contact number.

Singapore mobile number

E-FORM



Lawyer's Contact Number(s)

You must provide at least one contact number.

Mobile:

Enter mobile number here.

Direct line:

Enter number here.



Signature of

Counsel for the Enter party type here.

Date: Enter date here.

Part D: Return the completed Form

Please return the completed Form to:

Details of the other parties / other parties' lawyers will be included in the Form.

If the other party is represented by a lawyer, you may opt to serve the document through CrimsonLogic eLitigation.

78A.

P.7, r.3, r.8 FJ(G)R 2024

E-FORM

Affidavit of Service (Failed Attempts)

Section 1: Introduction

Name of maker:

Identity No.:

Occupation:

Address:

Enter full name as per NRIC/ Passport here. Enter NRIC/ FIN/ Passport no. here. Enter address here. Enter occupation here.

1a. I am

- \Box a process server of the Court.
- \Box a solicitor.
- \Box a solicitor's employee.
- □ self-represented. Enter party type here in Enter main case number here.
- Enter name or party type here in Enter main case number here.
- 1b. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

Section 2: Documents to be served

- 2. The documents to be served are as follows:
 □ Originating Application: Enter case number here.
 □ Summons: Enter summons number here.
 □ and its supporting affidavit
 □ Affidavit dated Enter date here by Enter full name or party type of maker of affidavit.
 □ Court order dated Enter date here.
 □ Others:
 - Insert title of documents here.

(collectively referred to as "Court Documents").

Notes

Please refer to Part 7, Rule 3(2) of the Family Justice (General) Rules 2024 for a list of persons who can effect service. If you fall outside of that list, you may seek the Court's approval to effect service at the next Case Conference or Court hearing.

You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

You will be prompted to attach all required documents before completing the affidavit.

Notes

Section 3: Attempted service

3. I attempted to serve the Court Documents on

Enter name or party type here

on the following occasions:

Attempt No. (insert no. here)

Enter date here and Enter time here

at the following address(es):

Enter address here.

Describe the efforts to effect service:

Enter details here.

The response to the attempts at service is:

 \Box No one answered the door.

□ The person who answered the door informed that: Enter name or party type here

- \Box is not in.
 - \Box is not at this address.

 \Box has moved away.

- \Box is overseas and his return date is
 - \Box on Enter date here.
 - □ unknown.

\Box Others:

Enter details here.

Notes

You must state:

- where and how you attempted service; and
- the response to your attempt, eg. no one answer the door, his mother answered the door and said he was not in.

□ The evidence to show my unsuccessful attempts are exhibited.

You must exhibit the evidence of your unsuccessful attempts at service.

I have made all reasonable efforts within my power to serve the Court Documents, but I have not been able to do so.

Section 4: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 5: Exhibit Content Page

Please refer to the Generic Affidavit (Form 54) of the Family Justice (General) Rules 2024 for the exhibit content and cover pages to be included in your affidavit (where applicable).

78B.

E-FORM

P.2, r. 8, P.5, r.18, P.7, r.3, r.8 FJ(G)R 2024

Affidavit of Service (Successful Attempt)

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/	
	Passport here.	Please refer to Part 7, Rule
T1		3(2) of the Family Justice
Identity No.:	Enter NRIC/ FIN/ Passport no. here.	(General) Rules 2024 for a
Address:	Enter address here.	list of persons who can effect
Occupation:	Enter occupation here.	service. If you fall outside of
1		that list, you may seek the
		Court's approval to effect
		service at the next Case
		Conference or Court

1a. I am

- \Box a process server of the Court.
- \Box a solicitor.
- \Box a solicitor's employee.
- □ self-represented. Enter party type here in Enter main case number here.
- Enter name or party type here in Enter main case number here.
- 1b. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

Section 2: Documents Served

1. I had served the documents in paragraph 2 on Enter full name of person to be served here on Enter date here at Enter address here.

Notes

hearing.

You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

You will be prompted to attach all required documents before completing the affidavit.

Notes

2. The documents served are as follows:

- □ Originating Application: <u>Enter case number here.</u>
- □ Summons: <u>Enter summons number here</u> □ and its supporting affidavit
- □ Affidavit dated Enter date here by Enter full name or party type of maker of affidavit.
- □ Court order dated Enter date here.
- □ Others: Insert title of documents here.

(collectively referred to as "Court Documents").

3. Manner of service

Select either option 3a, 3b or 3c and complete the questions under each option.

Personal service

3a. \Box The service was effected <u>personally</u> by

- leaving a copy of the documents with Enter full name of person here
 - \Box who is an officer of the entity to be served.
- Others:
 Enter information here.

The person served with the documents

- \Box is known to me.
- admitted that he/she is
 Enter full name of person to be served here.
- \Box was pointed out to me by

Enter full name of person here.

 \Box Others:

Enter information here.

Proceed to Section 3.

Deemed personal service

- 3b. \Box The service was effected in the manner in paragraph 4
- (i) and the person to be served has responded to the service in paragraph 5. Complete both paragraphs 4 and 5.
- (ii)
 <u>as agreed</u> with the person to be served. I attach the evidence of the agreement.
 Complete paragraph 4 only.

If none of the options apply, please explain how you know that you effected service on the correct person.

Please attach the evidence of service.

Substituted service

3c. □ The service was effected pursuant to Court order for substituted service dated: Enter date here.

How deemed personal service / substituted service was effected

- 4. I had served the documents on Enter full name of person to be served here by
 - posting on the front door at the following address: Enter address here.
 - ☐ AR registered post to the following address: Enter address here.

\Box virtual service in the following manner:

Select the manner	Provide the number / account
of virtual service	details
□ email	Enter number/account details
	here.
\Box WhatsApp	Enter number/account details
11	here.
	Enter number/account details
	here.
□ WeChat	Enter number/account details
	here.
□ Facebook	Enter number/account details
	here.
□ Others:	Enter number/account details
Enter details	here.
here.	

- □ via the Singpass app inbox with the Singpass ID Enter ID no. here belonging to the person to be served.
- □ advertisement in
 - □ Singapore
 - Enter country / state / province here.
 - newspaper in the following language:
 - \Box English
 - □ Mandarin
 - □ Tamil
 - □ Malay
 - □ Enter language here.

\Box The newspaper is known as:

Enter name of newspaper here.

\Box Others:

Enter information here.

The pe	erson to be served had responded by	
🗆 filiı	ng 🗆 returning	
	the Notice to Contest on:	
	Enter date here.	
	the Acknowledgment of Service on:	
	Enter date here.	
	a reply affidavit on:	
	Enter date here.	
	a Reply on:	
	Enter date here.	ות
	Others:	Ple res
	Explain what response was received e.g. email and date.	wa do

Please attach evidence of response unless the response was filed as a Court document.

Section 3: Supporting Documents

□ I have attached the relevant documents and evidence in support of this affidavit.

□ I am not including any documents or evidence in this affidavit.

Section 4: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 5: Exhibit Content Page

Please refer to the Generic Affidavit (Form 54) of the Family Justice (General) Rules 2024 for the exhibit content and cover pages to be included in your affidavit (where applicable).

79.

E-FORM

P.7, r.6 FJ(G)R 2024 Para 79(x) PD 2024

Summons for Substituted Service / Dispensation of Service

This form contains Notes to help you in the completion of the form. Please note that the Notes are \underline{NOT} to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

Sec	tion 1: Application	
1.	I am the Applicant in Enter main case number here. the Respondent in Enter main case number here. Enter name or party type here in Enter main case number here. 	<u>Notes</u> You may refer to the Originating Application for your party type. Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-
PAR	RT A	case number.
2.	I am applying for: Select <u>either</u> Dispensation <u>or</u> Substituted. You may add other orders by selecting "Others" as well. Dispensation of Service Substituted Service State the document(s) to be served: Enter name(s) of document(s) here. State who is the person to be served:	 You are unable to serve the Originating Application or Summons on the other party in the manner as required in the Rules. You would like the Court: to allow service on the other person to be done in another way (Substituted Service); OR
	Enter name or party type here.	• to do away with service on the other person completely (Dispensation of
	□ Others: Enter details here.	Service).
		Refer to the Family Orders Guide if you would like to consider standard orders.

If you have selected <u>Substituted Service</u>, proceed to the question 3. Otherwise, proceed to <u>PART B</u>.

- 3. **Substituted service** is to be effected by way of: Select <u>at least 1 option</u>.
- (a) posting on the front door at the following address: Enter address here.

(b) \Box AR registered post to the following address:

Enter address here.

(c) Select the manner of virtual service	Provide the number / account details
□ email	Enter number/account details here.
□ WhatsApp	Enter number/account details here.
	Enter number/account details here.
□ WeChat	Enter number/account details here.
□ Facebook	Enter number/account details here.
□ Others:	Enter number/account details here.
Enter details here.	

- (d) □ via the Singpass app inbox with the Singpass ID Enter ID no. here belonging to the person to be served.
- (e) advertisement

Where should the advertisement be done?

Enter country, state or province (if applicable) here.

What is the language of the newspapers?

- \Box English \Box Mandarin \Box Tamil \Box Malay
- □ Enter language here.

Do you know the name of the newspapers?

 \Box No \Box Yes

Enter name of newspaper here.

If the recipient does not respond within the time stated in the Rules, how will you serve the subsequent court documents?

- \Box I ask that the court dispenses with service of the subsequent documents.
- □ I will serve the subsequent documents in this manner: Enter mode of service.

If you know the name of the newspaper, please identify by the newspaper by name e.g. LianHe Zaobao, Berita Harian.

PART B

- 4. Costs of this summons
 - \Box Costs in the cause.
 - \Box No orders as to costs.
 - \Box Each party to bear own costs.
 - \Box Costs to be paid by
 - Enter name or party type here.
 - \Box Costs to be reserved to
 - Enter event here.
 - \Box Others:
 - Enter details here.

Costs in the cause means the costs of this application will be decided at and will depend on the outcome of the main proceedings.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

The reasons for this summons are stated in the supporting affidavit.

Affidavit

Section 1: Introduction

knowledge, information and belief.

			Notes
	ne of maker: ntity No.:	Enter full name as per NRIC/ Passport here. Enter NRIC/ FIN/ Passport no. here.	
	dress:	Enter address here.	
Occ	cupation:	Enter occupation here.	
1a.	\Box the Respon	ant in <u>Enter main case number here</u> . Ident in <u>Enter main case number here</u> . e or party type here in <u>Enter main case number</u>	You may refer to the Originating Application for your party type. Please state the OA case number i.e. FC/OAD 1/2022 and not the sub- case number.
1b.	This affidavit	is in support of the summons.	
1c.	knowledge, t	cts in this affidavit are within my personal hey are true. Where they are not within my wledge, they are true to the best of my	

2.	Under the Family Justice (General) Rules 2024, I am required to serve the following documents Enter name(s) of document(s) here. Image: the following document is the f	In this Form, "he / she" refers to the person to be served.
	("the documents") personally on:	
	Enter name or party type here.	
3.	I have applied for	
	□ dispensation of service.	
	\Box service to be done in the way as stated in the summons.	
	□ Others:	
	Enter details here.	
4.	Select the option based on your application.	
	□ I believe that Enter name or party type here will be informed of the proceedings if the documents are served in the way as stated in my summons.	[if you applied for substituted service]
	□ I am unable to serve <u>Enter name or party type here</u> in any way.	[if you applied for dispensation of service]
		anspensarion of service)
	Explain briefly why your application should be granted	[if others selected]

If you are applying for Substituted Service, proceed to <u>Section 2</u>. If you are applying for Dispensation of Service, proceed to <u>Section 3</u>. If you are applying for "Others", complete all entries which are applicable for your application. You may ignore the signposts if they are not applicable to your case.

Section 2: Substituted Service

Why personal service is impractical

Notes

I am unable to serve the documents personally on the other party for these reasons:

Enter details here.

Reasons why the substituted service will be effective: (Complete all relevant questions depending on your summons)

Section 2A: Posting on the front door

- a. I have made <u>(insert no. of)</u> attempts to serve the documents personally.
- b. I refer to the affidavit of service by <u>Enter full name as per NRIC/Passport here</u> dated Enter date here.
 - □ I am the person who attempted to serve the documents personally. (Complete <u>Annex A and proceed to (d).</u>)

c. The response to the attempts at service is:
No one answered the door.
The person who answered the door informed that Enter name or party type here.
is not in.
is not at this address.
has moved away.
is overseas and his/her return date is
Enter date here.
unknown.

□ Others:

<u>Notes</u> Applicable if you selected substituted service by posting on the front door.

You are required to make <u>at least 2 attempts</u> to serve the documents personally.

The person who effected service must affirm an affidavit of service. If you effected the service, you may complete <u>Annex A</u>.

You may refer to Part 7, Rule 3(2) of the Family Justice (General) Rules 2024 for the persons who may effect service.

If there is no response to the attempted service, you must provide:

- the evidence that the person to be served is currently residing at the address; or
- the grounds for your belief that the person to be served is currently residing at the address.

	Enter details here.	Otherwise, please complete (d).
		You must exhibit the evidence of your unsuccessful attempts at service.
d.	I believe that service at the following address will be effective for the following reasons: (Select <u>at least one option</u> in $(i) - (v)$.)	
(i)	 □ The property search results show that he / she is a □ registered owner □ permitted occupier of that property. Proceed to (f). 	If you selected option (i), you must exhibit the property search results.
(ii)	\Box I am staying at the same address and confirm that he / she is still living there. <i>Proceed to (f)</i> .	
(iii)	□ He / she is staying at the address at which attempts at service were made. I believe he / she is evading service. <i>Proceed to (f).</i>	
(iv)	□ I discovered that he / she is living at this address through my efforts set out below. <i>Proceed to (e), followed by (f).</i>	
(v)	Cher reasons: Enter details here. Proceed to (f) to elaborate on your reasons.	
0	Additional information for option d(iv)	
e. (i)	The last time I had contact with him / her was: Enter date or period here.	
	The details are as follows: Enter details here.	
	In the past, we would communicate with each other in this manner:	
	Enter details here.	

- (ii) He / she is a national of <u>Enter country here</u>.
- (iii) Select <u>either option 1 or 2</u> and complete the details.

Option 1

□ I know his / her □ family □ friends □ employer. Proceed to e(iv) if you have selected Option 1.

Option 2

□ I <u>do not</u> know his / her □ family □ friends □ employer.

Explain why:

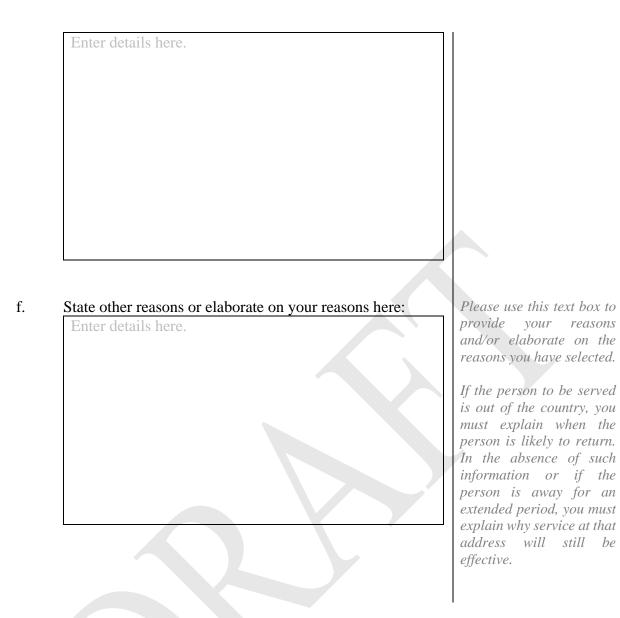
Enter details here.

Proceed to (f) if you have selected Option 2.

(iv) State who the social contacts are and how you know them:

Enter details here.

State your attempts to contact the social contacts, how you contacted them, and the outcome:



If you wish to explain why service cannot be effected via other methods, proceed to <u>Section 3</u>. Otherwise, proceed to Section 4.

Sectio	n 2B: AR registered post	
a.	I believe that <u>Enter name or party type here</u> ordinarily resides in <u>Enter country here</u> .	If the person to be served is outside Singapore, you must obtain the court's
b.	These are my reasons: Enter details here.	permission to serve the court document(s) out of Singapore. To do so, file the Summons for Service out of Jurisdiction (Form 80). The summons for service
c.	(Select <u>at least one option</u> in (i) $-$ (iii) and provide reasons for your statement(s) in (d).)	out of jurisdiction is not required if your case is for divorce, judicial

(i)	 I believe that Enter name or party type here is residing is working can receive correspondence at this address: Enter address here. 	separation, nullity, financial relief after foreign divorce.
(ii)	□ I □ Our children □ Enter name here.	
	last visited him / her at this address in	
	Enter month/year here.	
(111)	□ This is his / her last known address which is stated in	
	Enter details of document/message here.	
	dated Enter date here.	
d.	The reasons for my statement(s) are:	
	Enter details here.	
		1

If you wish to explain why service cannot be effected via other methods, proceed to <u>Section 3</u>. <i>Otherwise, proceed to <u>Section 4</u>.

	on 2C: Virtual service via virtual address, mobile numbers cial media
a.	☐ I believe that Enter name or party type here
	can be contacted at:
	Enter virtual address / contact number / virtual account /
	social media account here.
b.	\Box I believe that this
	□ virtual address and/or contact number
	□ social media account
	belongs to Enter name or party type here
	and remains active.

If the person to be served is outside Singapore, you must obtain the court's permission to serve the court document(s) out of Singapore. To do so, file the Summons for Service out of Jurisdiction (Form 80).

The Summons for Service out of Jurisdiction is not required if your case is for

c. The reasons for my statements are:

Enter details here.

divorce, judicial separation, nullity, financial relief after foreign divorce.

If you wish to explain why service cannot be effected via other methods, proceed to <u>Section 3</u>. <i>Otherwise, proceed to <u>Section 4</u>.

Section 2D: Singpass App Inbox a. I believe that service via Singpass app inbox will bring the proceedings to his / her notice. His / her Singpass ID is Enter ID here. b. The person to be served is a Singapore citizen. Proceed to (d). a Singapore Permanent Resident. Proceed to (c). a holder of the following pass: Employment Pass

- □ S Pass
- Long Term Visit Pass / Pass-Plus
- □ Work Permit
- □ Others: Enter details here.

Proceed to (c).

 \Box None of the above (i.e. not a Singapore citizen, Singapore Permanent Resident or a passholder in Singapore). *Proceed* to (c).

c. He / She has been living in Singapore since Enter date or year here.

 \Box He / She has been working in Singapore since <u>Enter</u> date or year here.

Singpass account is only available to Singaporeans, Singapore Permanent Residents or Passholders. If the person to be served does not fall within any of these categories, you may not be able to serve via this manner.

If you wish to proceed nonetheless, please proceed to provide the details in (c). d. I believe that he / she has a Singpass app and these are my reasons:

Enter details here.

- e. I understand that:
 - service via Singpass app inbox can only be effected if the person to be served has a Singpass app (and not just a Singpass account).
 - (ii) if the person to be served does not have a Singpass app, the service will be marked as "unsuccessful".

I undertake to inform the Court via an Affidavit of Service within 7 days once I am aware that the service is marked as "unsuccessful".

You must include this declaration so long as you are applying for substituted service by Singpass app.

If you wish to explain why service cannot be effected via other methods, proceed to <u>Section 3</u>. <i>Otherwise, proceed to <u>Section 4</u>.

Seo a.	tion 2E: Advertisement in newspapers I believe that service via advertisement posted in
	newspapers will bring the proceedings to his / her notice.
b.	He / She is a <u>Enter citizenship here</u> citizen and is literate in the <u>Enter language here</u> language.
c.	I believe that he / she currently resides in the following
	state/province, country:
	Enter the state/province and country here.
d.	\Box He / She has a habit of reading newspapers.
e.	\Box He / She would read
	\Box the local newspapers in
	Enter state/province, country.

If the person to be served is outside Singapore, you must obtain the court's permission to serve the Court document out of Singapore. To do so, file the Summons for Service out of Jurisdiction (Form 80).



Enter name of newspaper here.

f. I am aware of this habit because:

Enter details here.

The Summons for Service out of Jurisdiction is not required if your case is for divorce, judicial separation, nullity, financial relief after foreign divorce.

Select both options under (e) if you know the name of the newspapers as well.

g. I believe that he / she will be notified of the proceedings if an advertisement is placed in that newspaper.

Proceed to Section 3.

Section 3: Other Ways to Effect Service

If you are applying to <u>dispense</u> with service, you MUST complete the whole of Section 3. If you are applying for service via <u>advertisement</u>, you MUST complete the whole of Section 3 **except** for Section 3E.

For all other ways of service, you may choose which part of this Section to complete.

Section 3A: Last contact with the person to be served

Select <u>either Option 1 or 2</u> and complete the questions under that option.

Option 1

a. \Box I have never contacted him / her.

Explain why there was no contact:

Enter details here.

Option 2

b. <u>The details are as follows:</u>

Enter details here.

If you completed Section 2 and wish to explain why service cannot be effected in other ways, you do not need to repeat the same

information in Section 3.

Notes

c. In the past, we would communicate with each other in this manner:

Enter details here.

d. \Box I am <u>not</u> able to contact him / her using the same way.

The reasons why I am unable to contact him / her using the same way are:

Enter details here.

Section 3B: Physical address

Select <u>either Option 1 or 2</u> and complete the questions under that option.

Option 1

a. \Box I <u>have</u> his / her last known address.

This address was his / her

- \Box residential address
- \Box correspondence address
- \Box company address

 \Box others:

Enter details here.

accurate as at Enter date or month/year here.

b. The reasons why service at this address will <u>not</u> be effective are:

arei			
Enter details here	2.		

You may not need to complete Section 3B if you have applied for service by posting on the front door or by AR registered post.

Option 2

- a. \Box I <u>do not have</u> his / her last known address.
- b. The reasons why I do not have his / her last known address are:



Section 3C: Locating the person to be served through his/her social contacts

Select <u>the applicable option(s)</u> and complete the questions under that option.

Option 1

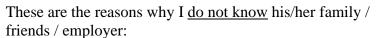
- a. □ I know his / her □ family □ friends □ employer.
- b. State who the social contacts are, how you know them and why the person to be served cannot be located through them: Enter details here.

You may not need to complete Section 3C if you have applied for service by posting on the front door or by AR registered post.

Option 2

a. □ I <u>do not</u> know his/her □ family □ friends □ employer.

14



Enter details here.

Section 3D: Virtual address, Mobile number or Social media

Complete either Question A, B or both. Within each question, select <u>either Option 1 or 2 (or 3 if applicable)</u> and complete the questions under that option.

A. Virtual address or mobile number

Option 1

a. I am aware that he / she has the following virtual address or mobile number (eg. email, Whatsapp, SMS):

Enter details here.

b. He/She cannot be served through the <u>known</u> virtual address or mobile number because:

Enter details here.

□ I am not aware that he / she has any other virtual address or mobile number.

Option 2

a. I do not have <u>any</u> of his / her virtual address or mobile number

State the reasons for your statement:

You may not need to complete Section 3D if you have applied for service by:

(i) posting on the front door (ii) by AR registered post, or
(iii) by virtual service.

If you have applied for substituted service using 1 method of virtual service (e.g. Virtual address or mobile number), complete Section 3D for the other method of virtual service (e.g. Social media).

You must include this declaration so long as you have selected Option 1 in Question A.

Enter details here.

B. Social media

Option 1

a. I am aware that he / she owns the following social media account(s) (eg. Facebook, Instagram, Wechat):

Enter details here.

b. He/She cannot be served through the **known** social media because:

Enter details here.

□ I am not aware that he / she has any other social media account(s).

Option 2

- a.
 I am not aware of any of his / her social media account.

 I have conducted a search on the following social media using his / her name:
 - □ Instagram
 - □ Facebook
 - □ Others: ⁴

Enter details here.

State the reasons for your statement:

Enter details here.

You must include this declaration so long as you have selected Option 1 in Question B.

Option 3

a. \Box I am unable to search for his / her social media account.

State the reasons for your statement:

Enter details here.

Section 3E: Advertisement

a. Select either Option 1 or 2.

Option 1

☐ He is a Enter country here

national.

Option 2

 \Box I am not aware of his / her nationality.

b. Select either Option 3 or 4.

Option 3

☐ He / She is literate in the Enter country here language.

Option 4

 \Box I am not aware of his / her literacy.

c. Select <u>Option 5 or 6</u>.

Option 5

□ I believe that he / she currently resides in in the following state/province, country:

Enter the state/province and country here.

Option 6

 \Box I do not know his / her whereabouts.

DO NOT complete Section 3E if you are applying for service via advertisement.

You may not need to complete this Section if you have applied for service by posting on the front door or by AR registered post or by virtual means.

d. Select either **Option 7, 8 or 9** and complete the questions under that option.

Option 7

□ He / She has a habit of reading newspapers, namely:

- the local newspapers in:
- Enter state/province, country. Enter name of newspaper here.

These are the reasons why service cannot be effected via advertisement in that newspaper:

Enter details here.

Option 8

 \Box He / She does not have a habit of reading newspapers.

My reasons for this statement are:

Enter details here.

Option 9

 \Box I am not aware if he / she reads newspapers.

These are the reasons why I am not aware:

Enter details here.

Section 3F: Other information (Optional)

Select both options under option 7 if you know the name of the newspapers as well.

Enter details here.

If you would like to provide other information to support your application, you may do so here.

Section 4: Summary of Claim

- □ I am asking that the Court grants my summons.
- \Box Others:

Enter details here.

Annex A: Attempted Service

I attempted to serve the Court Documents on Enter name or party type here. on the following occasions:

at

Attempt No. (insert no. here)

Enter time here, e.g. 8.30pm.

Enter date here. at the following address(es):

Enter address here.

Describe the efforts to effect service:

Enter details here.

The response to the attempts at service is:

- \Box No one answered the door.
- □ The person who answered the door informed that:

Enter name or party type here.

- \square is not in.
- \Box is not at this address.
- \Box has moved away.
- \Box is overseas and his return date is
 - Enter date here. \Box on

□ unknown

 \Box Others:

Enter details here.

Notes

You must state:

- where and how you attempted service; and
- the response to your • attempt, eg. no one answer the door, his mother answered the door and said he was not in.

You must exhibit the evidence of your unsuccessful attempts at service.

You may add more service attempts by copying and pasting the same entries.

I have made all reasonable efforts within my power to serve the Court Documents, but I have not been able to do so.

Section 5: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 6: Exhibit Content Page

Please refer to the Generic Affidavit (Form 54) for the exhibit content and cover pages to be included in your affidavit (where applicable).

80.

E-FORM

P.7, r.10 FJ(G)R 2024

Summons for Service out of Jurisdiction

Use this Form if you require the Court's permission to serve Court documents out of jurisdiction (ie. Singapore)^{*}.

When do you require Court's permission?

- When the document to be served is an Originating Application. AND
- When the person to be served is outside Singapore unless you fall within the exceptions below.

Exceptions

You will **<u>NOT</u>** need the Court's permission if:

- your Originating Application is for divorce, judicial separation, nullity, or financial relief after a foreign divorce.
- you had earlier obtained the Court's permission to serve out of jurisdiction in the same proceedings for the same party.
- there is an agreement between parties on how the Court documents are to be served outside Singapore.

^{*}If your application is under the <u>Mental Capacity Act 2008</u> ("MCA") and you are seeking permission to serve Relevant Persons who are outside Singapore by email, do NOT use this Form. Instead include your application in the Originating Application for Mental Capacity Act 2008 (Form 59).

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

Section 1: Application

1. I am

□ the Applicant in Enter main case number here.

□ the Respondent in Enter main case number here.

Enter name or party type here in Enter main case number here.

PART A

Complete all information in question 1.

1. I am applying for permission to serve the following documents out of Singapore:

□ Originating Application issued on Enter date here.

 \Box Others:

Enter name(s) of document(s) here.

State who is the person to be served:

Enter name or party type here.

State the place where the person is to be served:

State country and address here.

2. I am applying to extend the validity of the Originating Application.

Complete question 2a.

2a. I will require an extension of <u>Enter number here Select</u> applicable option^.

^ the options are: day(s) / week(s) / month(s)

The extension is to start from: ☐ the date of this Order. ☐ the last day of the deadline dated: Enter date here. The extension will end on: Enter date here.

3. State the reliefs which you are claiming here.

PART B

4. Costs of this summons

Notes

You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

You are applying for permission to serve the other party out of Singapore.

The Court's permission is **NOT** required in the following cases:

- 1. your Originating Application relates to: a. dissolution of marriage
 - b. financial relief after a foreign divorce.
- 2. there is an agreement between the parties that service out of Singapore is **not** required.

 \Box Costs in the cause. \Box No orders as to costs.

 \Box Each party to bear own costs.

 \Box Costs to be paid by

Enter name or party type here.

 \Box Costs to be reserved to

Enter event here.

 \Box Others:

Enter details here.

Costs in the cause means the costs of this application will be decided at, and will depend on, the outcome of the main proceedings.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

The reasons for this summons are stated in the supporting affidavit.

Section 2: Affidavit

Name of maker:	Enter full name as per NRIC/ Passport here.	Notes
Identity No.: Address: Occupation:	Enter NRIC/ FIN/ Passport no. here. Enter address here. Enter occupation here.	
1a. I am □ the App	licant in Enter main case number here.	You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

1

□ the Respondent in Enter main case number here.

Enter name or party type here in Enter main case number here.

- 1b. This affidavit is in support of the summons.
- Where the facts in this affidavit are within my personal 1c. knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

2a. I am applying for permission to serve the following documents out of Singapore: □ Originating Application issued on Enter date here.

\Box Others:

Enter name(s) of document(s) here.

("Documents")

2b. The Documents are to be served on:

Enter name or party type here.

("other party")

2c. The Documents are to be served at:

State country and address here.

- 3. The other party cannot be served in Singapore for these reasons: Enter details here.
- 4. The other party is likely to be at: <u>State the country/place here</u>.

The reasons for my statement are:

Explain the reasons for your belief here.

5. The other party's connection to Singapore

Select the applicable option(s) from (a) to (h) and complete the information under that option before proceeding to question 6. Otherwise, explain under "Others" at (i) before proceeding to question 6.

(a) \Box The other party has the following connection to Singapore:

Person	Connection to Singapore		
The other party	□ is a Singapore Citizen		
	□ is a Singapore Permanent Resident		
	□ lives in Singapore		
	□ works in Singapore		
	□ Others:		
	Enter details here.		

(b) Only for children orders or orders for patients (P)

□ I am seeking orders relating to a child / children / a patient. The person's connection to Singapore is relevant. *Complete the information below.*

Person	Connection to Singapore
□ All children	\Box is a / are Singapore Citizen(s)
\Box The following	□ is a / are Singapore Permanent Resident(s)
child(ren): Enter	\Box live(s) in Singapore
name(s) of	\Box work(s) in Singapore
child(ren) here.	□ Others:
\Box The patient	Enter details here.

(c) Only if the claim includes an injunction against the other party

□ As part of the action, I am seeking an injunction against the other party.

(d) Only if the person to be served is <u>not</u> a Respondent in the proceedings

Select the applicable option and complete the required information below.

\Box I have duly served the Respondent in the proceedings	Notes
on Enter date here through	
□ personal service	
□ substituted service	
\Box service which satisfies the requirement of deemed personal service ¹ .	E.g. the Respondent files a Court document in response
\Box Service on the Respondent in the proceedings is	to the initiation of Court proceedings. Refer to Part 7,
dispensed with pursuant to the court order dated	Rule $3(4)(b)$ of the Family
Enter date here.	Justice (General) Rules 2024.

The person to be served is a necessary or proper party to the proceedings for these reasons:

Enter details here.

(e) Only for monetary orders or property claims

¹ E.g. the Respondent files a Court document in response to the initiation of Court proceedings. Refer to Part 7, Rule 3(4)(b) of the Family Justice (General) Rules 2024.

Select the applicable option and complete the required information below.

□ I am making a monetary claim and the other party has assets in Singapore.
 □ I am seeking orders relating to the other party's assets or properties in Singapore.

The other party's property(ies) or assets in Singapore are set out:

Enter details here.

(f) Only for submission to jurisdiction

□ The other party submitted / agreed to submit² to the jurisdiction of the Singapore Courts in respect of this action.

Explain:

Enter details here.

(g) Only for committal order

 \Box The action is for a committal order against the other party under the Family Justice (General) Rules 2024.

(h) Only for construction, effect of enforcement of written law

If this option is applicable, complete all the information.

□ This action requires the Singapore court to decide on the written law in Singapore.

The written law in question is: [State provision(s)] in [the tile of the Act / Regulations / Rules].

Explain the issue or question you require the Court to decide :

Enter details here.

(i) Others (if none of the above selection is suitable)

If the application is for <u>disclosure of documents or information against a potential</u> <i>party or non-party, provide the following information in "Others" field:

² Delete as applicable.

- *i.* Explain the reasons for seeking disclosure: (a) to identify possible parties to proceedings (b) to enable tracing of applicant's property and/or (c) where it is in the interests of justice.
- *ii.* State if the intended proceedings against the potential party or non-party is intended to be commenced in Singapore.

\Box Others:

Enter details here.

- 6. Under the Family Justice (General) Rules 2024, I am required to seek permission of court to serve the Documents out of Singapore.
- 7. My action against the other party is set out briefly:

Enter brief details here.	

8. I seek the following reliefs:



9. I have good reasons to commence this action. The reasons are set out here:

Enter brief details here.	

Singapore is the most appropriate Court to decide this dispute

10. I believe that Singapore is the most appropriate Court to decide this dispute. The reasons are set out here.

Enter details here.

Extension of Originating Application

11. Do you require an extension of the Originating Application?

□ No. Proceed to Section 3.
□ Yes. Proceed to question 12.

12. I am applying to extend the validity of this Originating Application.

12a I will require an extension of <u>Enter number here Select applicable option</u>^.

^ the options are: day(s) / week(s) / month(s)

- 12b The extension is to start from:
 □ the date of this Order.
 □ the last day of the deadline dated: Enter date here. The extension will end on: Enter date here.
- 12c The Originating Application was issued on: Enter date here.
- 12d The validity of the Originating Application will expire on Enter date here ("deadline").
- 12e This application is filed before the validity period expires.
 □ Yes. Proceed to question 12f.
 □ No.

If your answer to question 12e is "No", you will not be able to file this application. The Family Justice (General) Rules 2024 do not allow the Originating Application to be extended after it has expired. Please seek legal advice if necessary.

- 12f Select the applicable option between (i) and (ii).
- (ii) The Court extended the validity of the Originating Application previously on <u>Enter</u> <u>date here</u>. The total extension granted was a period of <u>Enter no. of weeks/months</u> <u>here</u>.

The Family Justice (General) Rules 2024 only allow the Originating Application to be extended once for 6 months or less. If the Originating Application was already extended, you must have special circumstances which will support your application.

12g I require the extension of time for the following reasons:

Enter details here.	

13 *Provide any other information which is relevant to your application here.* Enter details here.

Section 3: Summary of Claim

 \Box I am asking that the Court grants my summons.

 \Box Others:

Enter details here.

Section 4: Affirmation

The affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 5: Exhibit Content Page

Please refer to the Generic Affidavit (Form 54) of the Family Justice (General) Rules 2024 for the exhibit content and cover pages to be included in your affidavit (where applicable).

11

81.

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P.7, r.21 FJ(G)R 2024 Para 52(2) PD 2024

Declaration of Notification

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OAM [number]/[year]

Sub Case No. [number]/[year]¹

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name]

[ID No.]

... Respondent(s)

DECLARATION OF NOTIFICATION

Name of maker: [Name of person effecting the notification]

NRIC: [Enter NRIC/Fin/Passport no. here]

- 1. I certify that I have notified the patient ("P"), [Enter full name as per NRIC/Fin/Passport here], [Enter NRIC/Fin/Passport no. here], of this Originating Application on [Enter date here] at [address where notification took place].
- 2. The notification complies with P. 7, r. 21(4) of the Family Justice (General) Rules 2024 and Paragraph xx of these Practice Directions. In particular, P was notified of [Please specify the matters which P was notified of].

Signed by:

Name: Enter name of person effecting notification here. Date: Enter date here.

¹ To insert sub-case details if relevant.

82A.

P.3, r.12, P.8, r.12 FJ(G)R 2024 Para 24A PD 2024

Summons / Application for Striking Out

When is this form used?

This form is used to strike out documents or proceedings. Depending on the main case which is filed, you can strike out the following documents / proceedings:

	Affidavits	Summons	Application	Main case	Reply (only in a case with prefix OAD / OADT)
If your main case has this prefix: OA		V	NA	V	\checkmark
If your main case has any of these prefixes: MSS, SS, VAP, VAM		NA	\checkmark	X	NA

Summons vs Application

If your main case is filed in eLitigation, you will select <u>Summons</u> when using this Form. If your main case is filed in <u>iFAMS</u>, you will select <u>Application</u> when using this Form. Please delete the inapplicable references when using this Form.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

Section 1: Application

State the main case number: Enter case number here.

- 1. I am
 - the Applicant in Enter main case number here
 - the Respondent in Enter main case number here
 - Enter name or party type here in Enter main case number here.

Notes

If you are filing this into *eLitigation*:

- You may refer to the Originating Application for your party type.
- Please state the OA case number i.e. FC/OAD

2

E-FORM

- 2. This summons / application is filed against
 - \Box the Applicant
 - \Box the Respondent
 - Enter name or party type here.

PART A

I am applying for:

- 1. the Court to strike out parts of the document / the entire document listed in the <u>Striking Out Table</u>.
- 2. State the reliefs which you are claiming here.
- 3. State the reliefs which you are claiming here.

PART B

4. Costs of this summons / application

 \Box Costs in the cause.

- \Box No orders as to costs.
- \Box Each party to bear own costs.
- Costs to be paid by Enter name or party type here.
- Costs to be reserved to Enter event here.

□ Others:

Enter details here.

- 5a. □ The reasons / evidence for this summons / application are stated in the supporting affidavit.
- 5b. □ The summons / application is filed without a supporting affidavit. I will refer to the following affidavits to support this summons / application:

Please complete the table below.

Person who filed the affidavit	Date of filing
Enter details here.	Enter date here.
Enter details here.	Enter date here.

1/2022 and not the subcase number.

If your main case is filed in *iFAMS*, you may refer to your main case for your party type.

Costs in the cause means the costs of this summons / application will be decided at and will depend on the outcome of the main proceedings.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

If you selected the reasons (a) or (b) in the Striking Out Table, you do not need to file an affidavit. You must affirm the Striking Out Table by using Section 2.

If you selected any other reasons in the Striking Out Table, please file a supporting affidavit. You may use the Generic Affidavit (Form 54).

Enter details here. Enter date here.

5c. □ I do not intend to rely on any evidence / facts and will not file a separate affidavit to support this summons / application.

Annexure: The Striking Out Table

Please annex the completed Striking Out Table: Form 82B.

Section 2: Affirmation/Declaration

Please complete this Section only if you are <u>not</u> filing a supporting affidavit. If you are filing a supporting affidavit, you do not need to insert the affirmation/declaration clause.

\Box Affirmation

Where the facts in the Striking Out Table are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

The summons / application is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

\Box Declaration¹

The application is to be declared in accordance with the Form of Declaration (Form 107) of the Family Justice (General) Rules 2024.

¹ If you are not represented by a lawyer, you may affirm this document before a Commissioner for Oaths (Affirmation) or choose to make a declaration (Declaration) under section 199 of the Penal Code 1871.

82B.

P.8, r.12, P.3, r.12 FJ(G)R 2024 Para 24A PD 2024

Striking Out Table

Case No.: Enter case no. here

Date: Enter date here

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(i.e.	tify the document state the filing date and g party)	State if it is the whole or part of the document. If part, identify the part(s) to be struck out.	Category 1: Applies to Originating Application / Reply / Summons
(a)	Enter details of the document here.	Enter details of the part(s) to be struck out.	Enter your reason(s) here.
(b)	Enter details of the document here.	Enter details of the part(s) to be struck out.	Enter your reason(s) here.

¹ Only applicable for a main case with prefix OAD / OADT.

(c)	Enter details of the document here.	Enter details of the part(s) to be struck out.	Enter your reason(s) here.
(d)	Enter details of the document here.	Enter details of the part(s) to be struck out.	Enter your reason(s) here.
(e)	Enter details of the document here.	Enter details of the part(s) to be struck out.	Enter your reason(s) here.

83.

Para Z(14) PD 2024

Summary for Mediation

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

[ID No.]

Originating Application

[Applicant's name]

No. FC/OA [number]/[year]

Sub Case No. [number]/[year]¹

And

Between

[Respondent's name]

[ID No.]

... Respondent(s)

... Applicant(s)

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SUMMARY FOR MEDIATION

Section 1: General

- [Enter case number here]. 1a. I am the \Box Applicant \Box Respondent in
- Length of marriage: Enter no. of years here. years Enter no. of months here. months 1b.

Section 2: Child(ren) Issues

Number of Child(ren): 2a. Age(s) of Child(ren):

Enter no. of child(ren) here.

Enter age here.

Custody

- 2b. I want \Box sole \Box joint custody of
 - \Box all children

□ Child's name: Enter full name as per NRIC/Passport here

¹ To insert sub-case details if relevant.

Care and Control

2c. \Box The Applicant is to be awarded care and control of

 \Box all children

Child's name: Enter full name as per NRIC/Passport here

 \Box The Respondent is to be awarded care and control of

 \Box all children

Child's name: Enter full name as per NRIC/Passport here

□ Both the Applicant and the Respondent to be awarded care and control of

 \Box all children

Child's name: Enter full name as per NRIC/Passport here

Access

2d. If I am the parent with care and control, I propose access as follows:

Enter details here.

2e. If I am not the parent with care and control, I propose access as follows:

Enter details here.

2f. If both the Applicant and the Respondent are awarded care and control, I propose access as follows:

Enter details here.

2g. Proposed handover venue and person to hand over the Child(ren):

Enter details here.

Section 3: Division of Matrimonial Assets

Matrimonial Home

3a.	Address of matrimonial home:	Enter address of matrimonial home here.
	Current value:	Enter current estimated value / valuation report value here.
	Outstanding loan amount:	Enter outstanding loan amount here.
	Applicant's CPF:	Principal amount: Enter principal amount here
		Interest: Enter interest amount here.
		Total: Enter total amount here.
	Respondent's CPF:	Principal amount: Enter principal amount here
		Interest: Enter interest amount here.
		Total: Enter total amount here.

Direct financial contributions

3b. I have made the following direct financial contributions towards purchase, mortgage, renovations, property tax, conservancy, maintenance, repairs:

Enter details here.	

Indirect contributions

3c. I have made the following payments e.g. towards household bills, groceries, Child(ren)'s expenses:

Enter details here.

Proposal for Division

3d. I propose division of the matrimonial assets as follows:

Enter details here.

Other Assets

3e. \Box I have the following other assets:

- ☐ Gifts: State each gift and its value here.
- **Inheritance:** State each inheritance and its value here.
- Assets held on trust for third parties: State each asset and its value here.
- □ Others: State each asset and its value here.
- \Box The Applicant \Box The Respondent have the following other assets:
 - **Gifts:** State each gift and its value here.
 - **Inheritance:** State each inheritance and its value here.
 - Assets held on trust for third parties: State each asset and its value here.
 - □ Others: State each asset and its value here.
- 3f. I claim the following percentage or monetary amount as regards above assets:

Enter details here.

Section 4: Maintenance

4a. Occuj	pation:
-----------	---------

Enter your occupation here.

Enter your net income here.

Maintenance of Child(ren)

4b. I \Box claim \Box propose the following expenses for the Child(ren):

Enter details here.

Maintenance of wife

4c. I \Box claim \Box propose the following expenses for the maintenance of wife:

Enter details here.

Maintenance of incapacitated husband

4d. I \Box claim \Box propose the following expenses for the maintenance of incapacitated husband:

Enter details here.

Section 5: Other Issues (if any)

5a. I wish to deal with the following other issues:

Enter details here.

83-AA.

Para 2(a) PD 2024 (FNE)

Consent for Family Neutral Evaluation

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

Between

No. FC/OA [number]/[year]

[Applicant's name]

Sub Case No. [number]/[year]¹

... Applicant(s)

And

[Respondent's name]

[ID No.]

[ID No.]

... Respondent(s)

CONSENT FOR FAMILY NEUTRAL EVALUATION

- 1. We confirm that our respective lawyers have explained to us the available Alternative Dispute Resolution options, including Family Neutral Evaluation ("FNE"), and we are aware of the benefits of an amicable resolution of our case.
- 2. We agree that:
 - (a) we will submit our dispute(s) on the following matters to a **non-binding** FNE at the Family Justice Courts ("FJC"):
 - Division of Matrimonial Home
 - Division of Other Matrimonial Assets (other than Matrimonial Home)
 - □ Maintenance for wife / incapacitated husband
 - $\Box \qquad \text{Maintenance for child(ren)}$
 - (b) we will provide all facts and circumstances, information and documents relevant and/or material for the evaluation of the dispute(s),
 - (c) we will participate in the FNE in good faith and abide by the Guidelines on Family Neutral Evaluation issued by FJC, and

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¹ To insert sub-case details if relevant.

- (d) we will keep confidential, treat as "without prejudice" and shall not disclose to (or use as evidence in proceedings before) the Court dealing with any of the ancillary matters of our divorce or in any other proceedings:
 - (i) all communications made during the FNE, including the Evaluator's evaluation, and
 - (ii) all documents and materials prepared, submitted and/or exchanged in the course of and for the FNE.
- 3. For the removal of doubt, we further confirm and agree that the following shall *not* be confidential:
 - (a) consent orders of court,
 - (b) directions given by the Evaluator/Judge after the conclusion of the FNE for the purpose of case management (including directions for the filing and exchange of affidavits), and
 - (c) documents and materials prepared, submitted and/or exchanged in the course of and for the FNE that would in any event have been discoverable in other proceedings.

Signed by:

Signed by:

Name of Applicant: Enter name here. Date: Enter date here. Name of Respondent: Enter name here. Date: Enter date here.

Without Prejudice For Family Neutral Evaluation Only

83-AB.

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Para 3(b) PD 2024 (FNE)

Statement for Family Neutral Evaluation

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

Between

No. FC/OA [number]/[year]

Sub Case No. [number]/[year]¹

[ID No.]

[Applicant's name]

... Applicant(s)

And

[Respondent's name]

[ID No.]

... Respondent(s)

□ APPLICANT'S □ RESPONDENT'S STATEMENT²

Section A: Particulars

1.	Age (birth date in brackets):	Enter age here. (Enter birth date here.)
2.	Date of Marriage:	Enter date here.
3.	Date of Interim Judgement - including period of separation (if applicable):	Enter date here.
4.	Occupation & educational /professional qualifications (where applicable):	Enter your occupation here. Enter your educational or professional qualifications here.
5.	Monthly Income: (based on average annual income of SGD [Enter your average annual income here] including bonuses based on latest Notice of Assessment)	Enter your monthly income here.

¹ To insert sub-case details if relevant.

 $^{^2}$ The completed Form is to be emailed to FJC (refer to Part x of the FJC Practice Directions). Do not file this Form via eLitigation.

Section B: Division of Matrimonial Assets

Note:

- (a) The full address of each immovable property (including the matrimonial home and all other properties) is to be listed. The date of purchase and purchase price, and if sold, the date of sale and sale price should be listed in the applicable "*Remarks*" column.
- (b) A liability which is related to an asset must be reflected together with the asset. An example is the mortgage loan.
- (c) A standalone liability must be stated as a negative value. An example is a personal loan.
- (d) An asset/liability should only be stated once in Section B and should not be duplicated in multiple sections. For example, a mortgage loan related to the matrimonial home should not be reflected separately as a standalone liability.
- (e) State only quantifiable assets in Section B2. Quantifiable assets include assets where a party asserts/claims to be of an ascertainable value. Please refer to examples in Section B2(B).

Section B1: Applicant's / Respondent's Position

This is the \Box Applicant's \Box Respondent's position.

1. I propose division of the matrimonial home as follows:

Enter details here, e.g. what you want in respect of the matrimonial home, and how the sale proceeds, if any, are to be split between parties.

2. I propose division of any other immovable matrimonial property as follows:

Enter details here, e.g. what you want in respect of the real property and how sale proceeds, if any, are to be split between parties.

3. I propose division of the other matrimonial assets as follows:

Enter details here.

Section B2: List of Matrimonial Assets

A. J	A. Joint Assets (Quantifiable)				
S/n	Asset (with related liability, if any)	Value	As At	Remarks (if any)	
1	For e.g. Property ABC (with outstanding mortgage).	Gross value (- liability) NET VALUE	Enter date here.	Enter details here.	
2	For e.g. Company XYZ.	Gross value (- liability) NET VALUE	Enter date here.	Enter details here.	
	Sub-total	Enter sub- total here.			

B. Assets under own name (Quantifiable)					
S/n	Asset (with related liability, if any)	Value	As At	Remarks (if any)	
1	For e.g. CPF accounts.	Gross value (- liability) NET VALUE	Enter date here.	Enter details here.	
2	For e.g. Bank Account 123.	Gross value (- liability) NET VALUE	Enter date here.	Enter details here.	

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3	For e.g. Car.	Gross value (- liability) NET VALUE	Enter date here.	Enter details here.
	Sub-total	Enter sub- total here.		

C. <i>A</i>	C. Assets under your spouse's name (Quantifiable)				
S/n	Asset (with related liability, if any)	Estimated Value	As At	Remarks (if any)	
1	For e.g. CPF accounts.	Enter current estimated value here.	Enter date here.	Enter details here.	
2	For e.g. Bank Account 123.	Enter current estimated value here.	Enter date here.	Enter details here.	
	Sub-total	Enter sub- total here.		1	

Section B3: Contribution towards Matrimonial Assets

A. I	A. Direct Financial Contributions			
()	(State your direct financial contributions to the assets stated in Section B2 above.)			
S/n	Item (in accordance with Section B2(A) to (C) above)	Amount		
1	For e.g. Property ABC – CPF.	Enter amount		
		here.		
	For e.g. Property ABC - Cash downpayment.	Enter amount		
		here.		
	For e.g. Property ABC – Renovations.	Enter amount		
		here.		
2	For e.g. Company XYZ.	Enter amount		
		here.		

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3	For e.g. H's CPF accounts.	Enter amount
		here.
4	For e.g. H's Bank Account.	Enter amount
		here.
5	For e.g. Car.	Enter amount
		here.
6	For e.g. W's CPF accounts.	Enter amount
		here.
7	For e.g. W's Bank Account.	Enter amount
		here.
	Sub- total	Enter sub-
		total here.

B. Indirect Contributions		
	Applicant	Respondent
I propose the following ratio for Indirect Contributions:	For e.g. 60%.	For e.g. 40%.

I. Indirect Financial Contributions

S/N	Description	Estimated amount / frequency	Remarks (if any)
	State payments made other than the Direct Financial Contributions set out above (for example, towards household bills, groceries, children's expenses, etc).	Enter amount/frequency here.	Enter details here.
	Sub-Total	Enter sub-total here.	

II.	Indirect Non-Financial Contributions
S/N	Description
	State in point form the indirect non-financial contributions made towards the family (for example, caring for the children, etc). The summary should not exceed 1 page.

Section C: Maintenance of Wife / Incapacitated Husband

Maintenance of \Box Wife \Box Incapacitated husband:

Description	Amount	Remarks (if any)
Is there an existing maintenance order or existing	For e.g.	Enter details here.
voluntary payment for spouse?	\$500	
 No. Proceed to Section C1. Yes. Provide details in the next column. 		
Is there an existing maintenance order or existing	For e.g.	Enter details here.
voluntary payment for household?	\$500	
 No. Proceed to Section C1. Yes. Provide details in the next column. 		

Section C1: Applicant's / Respondent's Position

This is the \Box Applicant's \Box Respondent's position.

I \Box claim \Box propose the following expenses for the maintenance of \Box wife \Box incapacitated husband:

State quantum of spousal maintenance claimed / offered and how the amount is calculated (i.e., Lumpsum (Multiplier x Multiplicand) (or) Monthly periodic sum).

Section C2: Paying spouse's / Receiving spouse's estimated expenses

□ Paying spouse's □ Receiving spouse's estimated expenses:

S/n	Item		Amount	Remarks (if any)
1	Mortgage Loan Cash		Enter amount here.	Enter details here.
		CPF	Enter amount here.	Enter details here.
2	Rental		Enter amount here.	Enter details here.
3	Telephone (Residence &	Mobile)	Enter amount here.	Enter details here.
4	Electricity / Water / Gas		Enter amount here.	Enter details here.
5	Conservancy Charges		Enter amount here.	Enter details here.
6	Cable TV / Internet		Enter amount here.	Enter details here.
7	Food / Groceries		Enter amount here.	Enter details here.
8	Eating Out		Enter amount here.	Enter details here.

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9	Clothing		Enter amount here.	Enter details here.
10	Personal Insurance		Enter amount here.	Enter details here.
11	Medical		Enter amount here.	Enter details here.
12	Vehicle Loan		Enter amount here.	Enter details here.
13	Motor Insurance and Ro	ad Tax	Enter amount here.	Enter details here.
14	Public Transport		Enter amount here.	Enter details here.
15	Domestic Servant	Levy \$	Enter amount here.	Enter details here.
		Salary \$	Enter amount here.	Enter details here.
16	Allowance for Parents	· · · · ·	Enter amount here.	Enter details here.
17	Entertainment, Hobbies a	and Sports	Enter amount here.	Enter details here.
18	Tour and Family Outings	5	Enter amount here.	Enter details here.
19	Others		Enter amount here.	Enter details here.
		Total	Enter total amount	
			here.	· · ·

Section D: Maintenance of Child(ren)

Description	Amount	Remarks (if any)
Is there an existing maintenance order or existing	Enter	Enter details here.
voluntary payment for children?	amount	
	here.	
\Box No. Proceed to Section D1.		
□ Yes. Provide details in the next column.		
Is there an existing maintenance order/existing voluntary	Enter	Enter details here.
payment for household?	amount	
	here.	
\Box No. Proceed to Section D1.		
□ Yes. Provide details in the next column.		
▼		

Section D1: Applicant's / Respondent's Position

This is the \Box Applicant's \Box Respondent's position.

I \Box claim \Box propose the following expenses for the Child(ren):

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State quantum of maintenance of children claimed / offered and how the children's total expenses should be divided (i.e. whether parties are to bear them equally, whether one party is to bear all the expenses, whether the expenses are to be divided 70:30, etc.).

Section D2: Position on the Child(ren)'s estimated expenses

S/n	Item	Amount	Remarks (if any)
1	Food / Groceries	Enter amount here.	Enter details here.
2	Clothing / Diaper	Enter amount here.	Enter details here.
3	Medical	Enter amount here.	Enter details here.
4	Personal Insurance	Enter amount here.	Enter details here.
5	School Expenses (Books/Stationery)	Enter amount here.	Enter details here.
6	Transport	Enter amount here.	Enter details here.
7	Pocket Money	Enter amount here.	Enter details here.
8	School Fees	Enter amount here.	Enter details here.
9	Childcare	Enter amount here.	Enter details here.
10	Enrichment / Tuition	Enter amount here.	Enter details here.
11	Entertainment, Hobbies and Sports	Enter amount here.	Enter details here.
12	Tour and Family Outings	Enter amount here.	Enter details here.
13	Others	Enter amount here.	Enter details here.
	Total	Enter total amount	
		here.	

Section D3: Applicant's / Respondent's estimated expenses

□ Applicant's □ Respondent's estimated expenses:

Note: To be completed only if Section C2 on spousal maintenance has not been filled.

S/n	Item		Amount	Remarks (if any)
1	Mortgage Loan Cash		Enter amount here.	Enter details here.
		CPF	Enter amount here.	Enter details here.
2	Rental		Enter amount here.	Enter details here.
3	Telephone (Residence &	Mobile)	Enter amount here.	Enter details here.
4	Electricity / Water / Gas		Enter amount here.	Enter details here.
5	Conservancy Charges		Enter amount here.	Enter details here.
6	Cable TV / Internet		Enter amount here.	Enter details here.
7	Food / Groceries		Enter amount here.	Enter details here.
8	Eating Out		Enter amount here.	Enter details here.
9	Clothing		Enter amount here.	Enter details here.
10	Personal Insurance		Enter amount here.	Enter details here.
11	Medical		Enter amount here.	Enter details here.
12	Vehicle Loan		Enter amount here.	Enter details here.
13	Motor Insurance and Roa	ad Tax	Enter amount here.	Enter details here.
14	Public Transport		Enter amount here.	Enter details here.
15	Domestic Servant	Levy \$	Enter amount here.	Enter details here.

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	Salary \$	Enter amount here.	Enter details here.
16	Allowance for Parents	Enter amount here.	Enter details here.
17	Entertainment, Hobbies and Sports	Enter amount here.	Enter details here.
18	Tour and Family Outings	Enter amount here.	Enter details here.
19	Others	Enter amount here.	Enter details here.
	Total	Enter total amount	
		here.	

Section E: Confirmation

I confirm that the information set out above is correct and accurate. I understand that the Evaluator will be relying on the information set out above for the Family Neutral Evaluation.

Signature

Name of \Box Applicant \Box Respondent: Enter name here. Date: Enter date here.

Section F: Supporting Documents³

S/N	Description	Page No
1	Pay-slips for [state time frame]	Enter
		page no.
2	Contract of employment/Letter from employer confirming salary	Enter
		page no.
3	Notices of Assessment from the Inland Revenue Authority of Singapore	Enter
	(IRAS) dated [Enter date here]	page no.
4	ACRA search dated [Enter date here] (in respect of the business(es) I	Enter
	own)	page no.
5	Valuation report(s) for immovable property/properties	Enter
		page no.

³ Please note that the list of documents in this section is intended as a guide only. It is not intended to set a minimum standard, nor to be an exhaustive list, in relation to each party's duty to disclose all relevant information and documents for the purposes of the neutral evaluation. The extent of disclosure which must be made in each case will depend on the facts of that case. Parties must exercise their own minds regarding the extent of disclosure to be made in the light of these facts, and in accordance with their duty of disclosure under Part 9 of the Family Justice (General) Rules 2024.

6	Tenancy agreement(s)	Enter
		page no.
7	Hire purchase agreement(s)	Enter
		page no.
8	Insurance policies/letters from insurance companies showing the	Enter
	surrender values of the insurance policies	page no.
9	Central Depository (Pte) Ltd (CDP) statement(s) dated [Enter date here]	Enter
		page no.
10	Central Provident Fund (CPF) Investment account statement(s) dated	Enter
	[Enter date here]	page no.
11	Bank statement(s) for [state time frame]	Enter
10		page no.
12	CPF statement(s) dated [Enter date here] on contribution to purchase of	Enter
	immovable property	page no.
13	CPF statement(s) dated [Enter date here] on balances in Special,	Enter
10	Medisave and Ordinary Accounts	page no.
		puge no.
14	Renovation receipt(s)	Enter
		page no.
15	Receipt(s) evidencing payment for furnishings	Enter
	Receipts supporting expenses, e.g. utilities bills, telephone bills,	page no.
	conservancy charges, school fees, etc.	
16	Others: Please specify	Enter
		page no.

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

83-AC.

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Para 8(b) PD 2024 (FNE)

Joint Statement for Family Neutral Evaluation

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application
Between

No. FC/OA [number]/[year]
[Applicant's name]

Sub Case No. [number]/[year]¹
[ID No.]

ID No.]
... Applicant(s)

And
[Respondent's name]

[ID No.]
... Respondent(s)

¹ To insert sub-case details if relevant.

² The completed Form is to be emailed to FJC (refer to Part $\frac{1}{x}$ of the FJC Practice Directions). Do not file this Form via eLitigation.

Without Prejudice for Family Neutral Evaluation Only EXPOSURE DRAFT Case No.: Enter case no. here

Date: Enter date of FNE Hearing here.

Section 1: Background Information

Parties shall refer to their respective Statements for FNE as their Core Bundle (CB) in this Joint Statement. The Husband's CB shall be referred to as "HCB" and the Wife's CB as "WCB".

S/No	Particulars	Applicant Husband / Wife	Respondent Husband / Wife	Remarks
1.	Current age of parties (birth date in brackets)	Enter age here. (Enter birth date here.)	Enter age here. (Enter birth date here.)	
2.	Date of Marriage	Enter da	ate here.	
3.	Date of Interim Judgment - including period of separation (if applicable)	Enter d	ate here.	
4.	Occupation and educational /professional qualifications where applicable	Enter Applicant's occupation here. Enter Applicant's educational or professional qualifications here.	Enter Respondent's occupation here. Enter Respondent's educational or professional qualifications here.	
5.	Monthly Income	Enter Applicant's monthly income here. (based on average annual income of SGD [Enter Applicant's average annual income here] including bonuses	Enter Respondent's monthly income here. (based on average annual income of SGD [Enter Respondent's average annual income here] including bonuses based	include Pg Ref to WCB/HCB if applicable.

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

based on latest Notice of	on	latest	Notice	of	
Assessment)	Asse	essment))		

Section 2: Child(ren)'s Details

Full Name	Current Age (birth date in brackets)	Parenting Arrangements (i.e. Custody / care and control / access)	Remarks(includeeducational/professionalqualificationswhereapplicable / whether childhas special needs)
Enter full name as per NRIC/Passport here.	Enter age here. (Enter birth date here.)	Enter details here.	Enter details here.

Section 3: Division of Assets

Where parties are in dispute over an item, parties are to set out their positions and reasons with references to their respective supporting documents (eg. HCB pg x, WCB pg x).

Where parties agree on the value of an item, to set out the agreed value and valuation date, with references to the supporting documents.

Section 3A: Joint Assets (Quantifiable)

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

S/n	Asset (with related liability)	Husband's Position	Wife's Position
1	For e.g. Property ABC (with outstanding mortgage).	For e.g. Market value (-outstanding loan) NET VALUE / As at DDMMYY [HCB pg x]	For e.g. Agreed NET VALUE / As at DDMMYY
2	For e.g. Company XYZ.	For e.g. Market value (-outstanding loan) NET VALUE / As at DDMMYY [HCB pg x]	For e.g. Agreed NET VALUE / As at DDMMYY
	Sub-total	Enter sub-total here.	Enter sub-total here.

Section 3B: Husband's Assets (Quantifiable)

S/n	Asset (with related liability)	Husband's position	Wife's position
3	For e.g. CPF accounts.	For e.g. Xxx /As at DDMMYY	For e.g. Disputed Yxx/As at DDMMYY [set out reasons, with reference to supporting documents in WCB]
4	For e.g. Bank Account.	For e.g. Xxx /As at DDMMYY	For e.g. Agreed
5	For e.g. Car.	For e.g.	For e.g.

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

	Xxx /As at DDMMYY	Agreed
Sub-total	Enter sub-total here.	Enter sub-total here.

Section 3C: Wife's Assets (Quantifiable)

S/n	Asset (with related liability)	Husband's Position	Wife's Position
6	For e.g. CPF accounts.	For e.g. Disputed Yxx/As at DDMMYY [set out reasons, with reference to supporting documents in HCB]	For e.g. Xxx /As at DDMMYY
7	For e.g. Bank Account. Sub-total	For e.g. Agreed	<i>For e.g.</i> <i>Xxx /As at DDMMYY</i> Enter sub-total here.

Section 3D: Parties' position on unquantifiable assets (if any)

To note:

- (a) State parties' positions on unquantifiable assets (if any).
- (b) Include assets which value is unknown to both parties and any assertion of non-disclosure.
- (c) Ensure 'Reasons' are summarised succinctly with relevant page references to the HCB/WCB where applicable.

S/n Asset Husband's Value Reasons

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

1			
2			
	Submission	To adjust average ratio by y%	

S/n	Asset	Wife's value	Reasons
1			
2			
	Submission	To adjust average ratio by y%	

Section 3E: Direct contributions

State parties' respective direct financial contributions to the assets stated in Sections 3A to 3C, and whether this is disputed or agreed. The s/n of each item in this section must match with the s/n of the corresponding item in Sections 3A to 3C.

S/n	Item	Husband	's position	Pg Refs	Wife's	position	Pg Refs
	(in accordance	Husband's	Wife's		Husband's	Wife's	
	with 3a–3c)	Direct	Direct		Direct	Direct	
		Contributions	Contributions		Contributions	Contributions	
1	For e.g. Property ABC –	For e.g. 123	For e.g. 456		For e.g.	For e.g.	
	CPF.				Agreed	Agreed	
	For e.g. Property ABC -	For e.g. 123	For e.g. 456		For e.g.	For e.g.	
	Cash downpayment.				Agreed	Agreed	
2	For e.g. Company XYZ.	For e.g. 123	For e.g. 456		For e.g. 789	For e.g. 123	
3	For e.g. H's CPF accounts.						

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

4	For e.g. H's Bank Account.					
5	For e.g. H's Car.					
6	For e.g. W's CPF accounts.					
7	For e.g. W's Bank Account.					
	Sub- total	Enter sub- total here.	Enter sub- total here.	Enter sub- total here.	Enter sub- total here.	
	Ratio (%)	Enter ratio of	Enter ratio of	Enter ratio of	Enter ratio of	
	(This should form the basis	direct	direct	direct	direct	
	of the ratio of Direct	contributions	contributions	contributions	contributions	
	Contributions in Section 3G	here.	here.	here.	here.	
	below)					

Section 3F: Indirect contributions

State parties' respective indirect contributions, and whether this is disputed or agreed.

S/n	Item	Husband's position		Pg Refs	Wife's position		Pg Refs
		Husband's	Wife's		Husband's	Wife's	
		Contributions	Contributions		Contributions	Contributions	
1	Indirect Financial						
	Contributions						
(i)	Description of contributions	For e.g. 123	For e.g. 456		For e.g. 987	For e.g. Agreed	

Without Prejudice for Family Neutral Evaluation Only

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

(ii)	Description of contributions	For e.g. 123	For e.g. 456		For e.g. Agreed	For e.g. 987	
(iii)	Description of contributions	For e.g. 123	For e.g. 456		For e.g. Agreed	For e.g. Agreed	
	Sub-total						
2	Indirect Non-Financial Contributions			See para xx of Applicant/ Respondent's Statement			See para xx of Applicant/ Respondent's Statement
	Ratio (%)(This should form the basis of the ratio of Indirect Contributions in Section 3G below)	Enter ratio of indirect contributions here.	Enter ratio of indirect contributions here.		Enter ratio of indirect contributions here.	Enter ratio of indirect contributions here.	

Section 3G: Proposed structured approach ratios

State the proposed ratios, if applicable.

	Husband	's Position	Wife's Position		
	Husband	Wife	Husband	Wife	
Direct Contributions	Enter ratio of direct				

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

	contributions here.	contributions here.	contributions here.	contributions here.	
Weightage for Direct Contributions		be accorded to direct ions here.	Enter weightage to be accorded to direct contributions here.		
Indirect Contributions	Enter ratio of indirect contributions here.	Enter ratio of indirect contributions here.	Enter ratio of indirect contributions here.	Enter ratio of indirect contributions here.	
Weightage for Indirect Contributions	Enter weightage to be contribut	e accorded to indirect ions here.	Enter weightage to be accorded to indirect contributions here.		
Average Ratio	Enter average ratio based on weightage to direct contributions here.	Enter average ratio based on weightage to direct contributions here.	Enter average ratio based on weightage to indirect contributions here.	Enter average ratio based on weightage to indirect contributions here.	
Adjustment to Ratio (if any) and brief reasons					
Final Ratio (<i>inclusive of adjustment or</i> <i>changes due to weightage, if any</i>)	Enter final ratio here.	Enter final ratio here.	Enter final ratio here.	Enter final ratio here.	

Section 4: Maintenance of Wife / Incapacitated Husband

Maintenance for \Box Wife \Box Incapacitated Husband:

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

	estimate	Pg Refs	Wife's estimate	Pg Refs	Remarks
Is there an existing maintenance order or existing voluntary payment for spouse?	For e.g. \$500		For e.g. \$100		Enter details here.
□ No. □ Yes. Provide details.					
Is there an existing maintenance order or existing voluntary payment for household?	For e.g. \$500		For e.g. \$100		Enter details here.
□ No. □ Yes. Provide details.				~	
Total	Enter total		Enter total		
[s	 No. □ Yes. <i>Provide details</i>. a there an existing maintenance order or kisting voluntary payment for household? No. □ Yes. <i>Provide details</i>. 	I No. □ Yes. Provide details. a there an existing maintenance order or xisting voluntary payment for household? I No. □ Yes. Provide details.	I No. □ Yes. Provide details. Total Enter total	I No. □ Yes. Provide details. For e.g. \$500 For e.g. \$100 I here an existing maintenance order or xisting voluntary payment for household? For e.g. \$500 For e.g. \$100 I No. □ Yes. Provide details. Total Enter total Enter total	I No. □ Yes. Provide details. For e.g. \$500 For e.g. \$100 I here an existing maintenance order or xisting voluntary payment for household? For e.g. \$500 For e.g. \$100 I No. □ Yes. Provide details. Total Enter total Enter total

Section 4A: Main proposals

		Position of receiving spouse	Position of paying spouse
Lump sum	(Multiplier x	Enter position of receiving spouse here.	Enter position of paying spouse here.
Multiplicand) periodic sum	or Monthly		

Section 4B: Parties' respective positions on the spouse's estimated expenses

S/n	Item	Receiving	Pg Refs	Paying	Pg Refs	Remarks
		spouse's		spouse's		
		estimate		estimate		

EXPOSURE DRAFT

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

1	For e.g. clothes.	For e.g. \$500.	For e.g. \$100.	State the reasons for the dispute here (whether it is on principle or quantum or both, as applicable).
2				
3				
	Total	Enter total estimate here.	Enter total estimate here.	

Section 5: Maintenance for Child(ren)

S/n	Item	Husband's estimate	Pg Refs	Wife's estimate	Pg Refs	Remarks
1	Is there an existing maintenance order or existing voluntary payment for children?	For e.g. \$500.		For e.g. \$100.		Enter details here.
	\Box No. \Box Yes. <i>Provide details</i> .					
2	Is there an existing maintenance order or existing voluntary payment for household?	For e.g. \$500.		For e.g. \$100.		Enter details here.
	□ No. □ Yes. Provide details.					
	Total	Enter total estimate here.		Enter total estimate here.		

Section 5A: Main proposals

S/n Husband's Claim offer for maintenance for the children

Without Prejudice for Family Neutral Evaluation Only

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

1	State how the children's total expenses should be divided (i.e. whether parties are to bear them equally, whether one party is to bear all the expenses, whether the expenses are to be divided 70:30, etc.) and the quantum of maintenance claimed / offered.					
	Wife's 🗆 claim 🗆 offer for maintenance for the children					
2	State how the children's total expenses should be divided (i.e. whether parties are to bear them equally, whether one party is to bear all the expenses, whether the expenses are to be divided 70:30, etc.) and the quantum of maintenance claimed / offered.					

Section 5B: Parties' positions on the children's estimated expenses

Use a separate table for each child if the list of expenses is not common for all children.

S/n	Item	Husband's	Pg Refs	Wife's	Pg Refs	Remarks
		estimate		estimate		
1	For e.g. Toys.	For e.g. \$500.		For e.g. \$100.		State the reasons for the dispute here (whether it is on principle or quantum or both, as applicable).
2						
3						
	Total	Enter total estimate here.		Enter total estimate here.	A	

Section 6: Declaration

Without Prejudice for Family Neutral Evaluation Only

Case No.: Enter case no. here Date: Enter date of FNE Hearing here.

The parties understand that the Evaluator will rely on the parties' respective positions in this Joint Statement when evaluating the parties' dispute in respect of the ancillary matters referred for Family Neutral Evaluation. Where this Joint Statement discloses material facts or questions of law which are agreed between the parties, the Evaluator may rely on the agreed facts or questions of law when making his/her evaluation.

The Applicant accepts the Joint Statement to be his/her final position for the purposes of the Family Neutral Evaluation.

The Respondent accepts the Joint Statement to be his/her final position for the purposes of the Family Neutral Evaluation.

Signature Name of Applicant: Enter name here. Date: Enter date here. Signature Name of Respondent: Enter name here. Date: Enter date here.

83-AD.

Para 7 PD 2024 (FNE)

Agreement for Binding Family Neutral Evaluation

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

[ID No.]

Originating Application

Between

No. FC/OA [number]/[year]

[Applicant's name]

Sub Case No. [number]/[year]¹

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

AGREEMENT FOR BINDING FAMILY NEUTRAL EVALUATION

- 1. We confirm that we have been fully advised by our respective lawyers on the procedure and nature of the Family Neutral Evaluation process and we understand that the default position is that it would be non-binding.
- 2. However, in the interests of resolving the disputes between us amicably and without any further escalation of costs, we hereby confirm and agree to all the following:
 - (a) that the Family Neutral Evaluation ("FNE") on the matters set out below shall be final and binding on us:
 - Division of the Matrimonial Home: *To provide details*.
 - Division of Other Matrimonial Assets (other than Matrimonial Home)
 - Spousal Maintenance for: To provide details of wife/incapacitated husband.
 - □ Maintenance for Child(ren): *To provide details of the Child(ren)*.
 - (b) that we have filed our ancillary affidavits and will provide all facts and circumstances, information and documents relevant and/or material for the binding evaluation of the above matters;

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¹ To insert sub-case details if relevant.

- (c) that we will participate in the FNE in good faith and abide by the Guidelines on Family Neutral Evaluation issued by the Family Justice Courts, and
- (d) at the end of the FNE, we shall forthwith submit a draft consent order to the court for its approval to give effect to the written binding evaluation of the Evaluator ("Binding Evaluation").
- 3. We acknowledge and agree that if any party is in default of his/her obligations under paragraph 2(d) above ("defaulting party"), the other party ("non-defaulting party") may at the appropriate juncture make submissions to the court for costs to be awarded against the defaulting party. We understand that the court has full discretion to make any cost orders as it deems fit.
- 4. We further confirm and agree that all communications made and all documents and materials prepared, submitted and/or exchanged in the course of and for the FNE shall be confidential and on a without prejudice basis except for the following:
 - (a) this Agreement and the Binding Evaluation;
 - (b) the consent orders of court;
 - (c) directions given by the Evaluator/Judge after the conclusion of the FNE for the purpose of case management (including directions for the filing and exchange of affidavits), and
 - (d) documents and materials prepared, submitted and/or exchanged in the course of and for the FNE that would in any event have been discoverable in other proceedings.

Signed by:

Signed by:

Name of Applicant: Enter name here. Date: Enter date here. Name of Respondent: Enter name here. Date: Enter date here.

84.

P.2, r.17, P.9, r.5, r.10 FJ(G)R 2024

E-FORM

□ Summons for Disclosure / □ Originating Application / Summons for Permission to seek Disclosure

This Form is used to:

- (a) apply for disclosure against a party in the current proceedings.
- (b) apply for permission and disclosure against a non-party in the current proceedings.
- (c) apply for permission and disclosure against a potential party before legal proceedings are commenced.

Scenario (a)

File this Form as a <u>Summons</u> and serve the Summons on the other party in the proceedings.

Scenario (b)

If you are seeking disclosure against a non-party, ie. a person who is not a party in the current proceedings, you must first obtain the Court's permission. To obtain permission, complete this Form as a <u>Summons</u> and serve the Summons on the other party in the proceedings.

Scenario (c)

If you seek disclosure before commencing legal proceedings, you must first obtain the Court's permission. To obtain the Court's permission, file this Form as an <u>Originating Application</u>. The Originating Application is filed without notice, i.e. without naming or serving a Respondent. You must file a supporting affidavit in this case.

After obtaining the Court's permission in Scenarios (b) and (c)

After you obtained the Court's permission, use this Form as a <u>Summons</u> to apply for disclosure against the non-party (in (b)) or potential party (in (c)). In both cases, you will have to serve the Summons and all relevant documents on the person who is to provide disclosure if the order is granted.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

This form, when submitted to the Court as an Originating Application, will be generated in accordance with the layout of the Generic Originating Application (Form 53). If this Form is submitted to the Court as a Summons, it will be generated in accordance with the layout of the Generic Summons (Form 67).

This Notice serves as a reminder to the Applicant and does not appear as part of the issued Originating Application ("OA").

IMPORTANT: Duty to consider amicable resolution

Pursuant to the Family Justice (General) Rules 2024 ("FJ(G)R 2024"), you are required to consider amicable resolution of the dispute before and after commencing Court proceedings. This means that you should either:

- i. explore alternative ways of settling the dispute without resorting to legal action; or
- j. make an offer to the other party to settle the dispute.

For more information on your obligations, please refer to the Information Sheet on Amicable Dispute Resolution and Part 4 of the FJ(G)R 2024.

2

Section 1: Application

- □ I am filing a Summons for Disclosure under the main case, Originating Application no. Enter the FC/OA or HCF/OA number here.
 - □ I am filing an Originating Application for permission to seek Disclosure.
 - □ I am filing a Summons for Permission to Seek Disclosure under the main case, Originating Application no. Enter the FC/OA or HCF/OA number here.
- I am
 □ the Applicant in Enter main case number here.
 - □ the Respondent in Enter main case number here.
 - □ <u>Enter name or party type here</u> in <u>Enter main case</u> <u>number here</u>.

- 3. This summons is filed against
 - \Box the Applicant
 - □ the Respondent
 - Enter name or party type here.

PART A

- 4. I am applying for:
 - (a) \Box Disclosure as stated in the Annexure (<u>Disclosure</u> <u>Table</u>).
 - (b) □ The Court's permission to apply for disclosure in the Annexure (<u>Disclosure Table</u>) against:

 \Box A non-party:

Notes

If you are filing an Originating Application, please complete Sections A (where applicable) and B of the Originating Application: Generic Sections (Form 53B).

If you are filing an Originating Application, you are not required to enter the case number.

If you are filing a Summons, you may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

If the summons do not involve another party, you do not need to complete question 3.

If the summons is against a person who is not an existing party to the proceedings, you must provide the details of the person in Section B of the Originating Application: Generic Sections (Form 53A).

You will require the Court's permission if the disclosure is sought against a non-party or a potential party. If against a non-party, the summons for approval is filed against the other party in the action. If against a potential party, this summons will not involve another party.

Enter the full name of the non-party here.

\Box A potential party:

Enter the full name of the potential party here.

5. Complete this question only if you have selected option 4(a) above.

In respect of each item in Annexure, the Responding Party is to provide

- (a) the requested document
- (b) if the document is not within the Responding Party's possession or control, state the reasons why
- (c) if the document left the Responding Party's possession, state when the Responding Party parted with possession and what has become of the document
- (d) the information which is within the Responding Party's knowledge

Select only 1 option. \Box in an affidavit.

 \Box in a letter.

PART B

- 6. Costs of this summons / Originating Application
 - \Box Costs in the cause.
 - \Box No orders as to costs.
 - \Box Each party to bear own costs.
 - Costs to be paid by Enter name or party type here.
 - \Box Costs to be reserved to
 - Enter event here.
 - \Box Others:

Enter details here.

7. Select only 1 option.

Mandatory if you are filing an Originating Application.

- 7a. □ The reasons for this summons / originating application are stated in the supporting affidavit.

Please complete the table below.

For the purposes of this summons, the person named in question 3(b) is referred to as the "Responding Party I".

Costs in the cause means the costs of this application will be decided at and will depend on the outcome of the main proceedings. This option is applicable only if you are filing a summons.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

Use the Disclosure Affidavit (*Form* 86).

Person who filed the affidavit	Date of filing		
Enter details here.	Enter date here.		
Enter details here.	Enter date here.		
Enter details here.	Enter date here.		

I do not intend to rely on any evidence / facts and will not file a separate affidavit to support this summons.

Annexure: The Disclosure Table

Please annex the completed Disclosure Table: Form 85.

Section 2: Affirmation

Insert the affirmation clause here only if you are **<u>not</u>** filing a supporting affidavit. If you are filing a supporting affidavit, you do not need to insert the affirmation clause.

Where the facts in the Annexure are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

The summons is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Instructions to the Responding party

The Summons will be generated with these instructions when filed.

- 1. The other party ("A") has applied to Court for you to disclose certain information or documents. You are the Responding Party ("R").
- 2. To respond to the summons, you must within <u>28 days</u>
 - (a) Complete the Reply to Disclosure (Form 87).
 - (b) If you agree to disclose any item, you are to provide the item in the way stated in paragraph 2 of the summons.
 - (c) If you object to any item, state your reasons in Reply to Disclosure.

Notes

You are to file and serve all documents in same manner as all other Court documents.

Paragraph 2(b) is not applicable if the summons is for permission to seek disclosure.

- (d) If you need to refer to any evidence to explain your reasons, you can either
 - (i) rely on a previous affidavit, or
 - (ii) file a new affidavit if the evidence is new.

To file a new affidavit, you may use the Generic Affidavit (Form 54).

If you are <u>not</u> filing a new affidavit, you must affirm the Reply to Disclosure.

85.

P.2, r.17, P.9, r.5, r.10 FJ(G)R 2024

Disclosure Table: The Applying Party's Table

Case No.: Enter case no. here

Date: Enter date here

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Each row should contain only 1 subject matter or item (E.g. xx bank account number: xxxx). **Please number each row consecutively.**

	asking for information	/ documents	Reference		Party who filed	l the affidavit:	Filing date of affidavit:
pertaining to the Affidavit(s):			Enter reference		Enter name or party type here.		Enter date here.
	ere is more than 1 affida		here.				
refere	nce to each affidavit, e.g. I	PA1, PA2)	Enter reference	ce	Enter name or	party type here.	Enter date here.
			here.				
No.	Information or document required*	Is the original document required? (Please select: Yes or No, Not applicable)	Requested timeframe Requested frequency	Affida If ther reference affida	ence in the avit re is no nce in the vit, state the asserted.	 Reasons for the request State: a) How is the disclosure necessar b) Does the Responding Party has or information? c) Can the Responding Party obt 	ve the requested document
S/No	Enter details here.	Select an option.	Enter details here.	Enter	details here.	Enter details here.	
S/No	Enter details here.	Select an option.	Enter details here.	Enter	details here.	Enter details here.	

S/No	Enter details here.	Select an option.	Enter details here.	Enter details here.	Enter details here.
S/No	Enter details here.	Select an option.	Enter details here.	Enter details here.	Enter details here.
S/No	Enter details here.	Select an option.	Enter details here.	Enter details here.	Enter details here.

* If the request is for information or document(s) relating to specific account(s) such as bank, trading or investment account(s), account number(s) should be stated.

85A.

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Para XX(2) PD 2024

Information on Agreed Voluntary Disclosure

Case No.: Enter case no. here

Date: Enter date here

- 1. This form is filed by the □ Applicant □ Respondent □ [Enter name or party type here], the party seeking disclosure ("the requesting party").
- 2. The \Box Applicant \Box Respondent \Box [Enter name or party type here] has agreed to provide voluntary disclosure ("the disclosing party") as set out below:

Date of request for disclosure: Enter date here								
Manner of	Manner of request: Disclosure table Correspondence							
S/N. in the	State the agreed scope	State the scope of agreement if partial						
request	of disclosure	disclosure						
Enter S/N	□ Full disclosure	Enter details here.						
here	□ Partial disclosure							
Enter S/N	□ Full disclosure	Enter details here.						
here	□ Partial disclosure							
Enter S/N	□ Full disclosure	Enter details here.						
here	□ Partial disclosure							

Add additional rows if required.

- 3. The disclosing party has agreed to provide the voluntary disclosure by [Enter date here].
- 4. The requesting party confirms that the request for disclosure was issued to the disclosing party with the requisite warning as set out below:

This is a request for voluntary disclosure issued by the other party ("the requesting party"). If you agree to disclose any or all of the documents / information sought, the requesting party may rely on your agreement to (i) dispense with the filing of a summons for disclosure and (ii) request that the Court records your agreement as an order of Court.

If you are not represented by a solicitor, you may wish to consult an independent lawyer (not the requesting party's lawyer) to understand the legal effect of this document.

5. The requesting party will \Box file \Box not file a summons for disclosure.

Signature of requesting party / requesting party's solicitor Name: Enter name here Date: Enter date here

To include as annexures to this form: Annex A: Request for disclosure Annex B: Agreement to disclose

cc. Disclosing party

86.

E-FORM

P.2, r.17, P.3, r.21, P.9, r.5, r.10 FJ(G)R 2024 Para 24 PD 2024

Disclosure Affidavit

This Form is used if a supporting affidavit is to be filed with the Disclosure application in Form 84. This Form can be used for disclosure applications filed in both iFAMS (i.e. MSS case) and eLitigation.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

Section 1: Affidavit

If you are filing this form in iFAMS, only the parts in blue boxes are applicable to you.

Name of maker: Identity No.: Address: Occupation:	Enter full name as per NRIC/ Passport here. Enter NRIC/ FIN/ Passport no. here. Enter address here. Enter occupation here.	Notes
\Box the Resp	licant in Enter main case number here. condent in Enter main case number here. <u>me or party type here</u> in Enter main case here.	 If you are filing this into eLitigation: You may refer to the Originating Application for your party type. Please state the OA case number i.e. FC/OAD 1/2022 and not the subcase number. You are not required to state the case number if you are filing this affidavit to support an Originating Application. If your main case is filed in iFAMS, you may refer to your main case for your party type.

 2. This affidavit is in support of the Select the applicable option. Others: Enter details here. 	Explain the purpose of this affidavit. You will be prompted to attach all required documents before completing the affidavit. The applicable options are: summons / Originating Application / Application. If this Form is filed as part of MSS case (i.e. in iFAMS), select "application". If this Form is filed in eLitigation, select "summons" or "Originating Application" as appropriate.
Select either option 3a or 3b (as applicable).	
3a. □ I am applying for Disclosure as stated in the Annexure (Disclosure Table) against: Enter name or party type here ("referred to as "R")	If this Form is filed as part of MSS case, only option 3a is applicable.
 3b. □ I am applying for the Court's permission to apply for disclosure in Annexure (Disclosure Table) against: □ A non-party: <u>Enter the full name of the non-party here.</u> (referred to as "R") □ A potential party: <u>Enter the full name of the potential party here.</u> (referred to as "R") 	Option 3b is not applicable if this Form is filed as part of MSS case.
 To further explain any item in the Annexure (Disclosure Table), select the option(s) which best fits your reason or state your own reasons in option 4f. You may use the same option more than once if the option applies to more than 1 item in the Annexure (Disclosure Table). 4a. I refer to item Enter S/No. here of the Annexure (Disclosure Table). 4a. I refer to item Enter S/No. here of the Annexure (Disclosure Table). I am aware that this document exists. I am relying on this document / information to I support my position in the action. Enter details of your position here. 	Select option 4a if you would like the other party to produce a specific document which will support your claim or undermine the other party's claim. This is "a known adverse document".
☐ dispute the R's position in the action.	

	Enter details of the position in dispute here.	
	This document / information is necessary to show: Enter details here.	
4b.	 I refer to item Enter S/No. here of the Annexure (Disclosure Table). I am asking the Court to allow a broader scope of disclosure. This is because □ the parties had agreed to a wider scope of disclosure. Exhibit the agreement in Section 5. □ there are special circumstances. 	Select option 4b if you are seeking a broader scope of disclosure.
	Enter details of your selected option here.	
4c.	I refer to item Enter S/No. here of the Annexure (Disclosure Table). This document is ordinarily within my possession or control but there are special circumstances to ask for this document.	
	Enter details of the special circumstances here.	
4d (i).	I refer to item Enter S/No. here of the Annexure (Disclosure Table). I believe that the document is within R's possession or control.	Select option 4d(i) if R disputes that the item is not within R's possession or control.
4d (ii)	I refer to item Enter S/No. here of the Annexure (Disclosure Table). I believe that the information is within R's knowledge.	Select option 4d(ii) if R disputes that the information is not within R's knowledge.
	Enter details of your selected option here.	Option 4d(ii) is not applicable if this Form is filed as part of MSS case.

4e.	 I am seeking disclosure against a potential party / non-party because the document is within his/her possession or control. the disclosure is necessary to identify potential parties to action. I need to trace my property. it is in the interests of justice. Enter details of your selected option here.	If you are seeking permission to file a disclosure summons, you may select option 4e to explain why it is necessary to seek disclosure against a non-party / potential party. Option 4e is not applicable if this Form is filed as part of MSS case.
4f.	I refer to item Enter S/No. here of the Annexure (Disclosure Table). Other reasons for seeking disclosure are: Enter details here.	Select option 4f if none of the above reasons apply and provide your reasons.
5.	Other information:	If you would like to provide other information to support your application, you may do so here.

Enter details here.	

Section 2: Supporting Documents

□ I am attaching the relevant documents and evidence in support of this affidavit.

<u>Notes</u>

□ I am not including any documents or evidence in this affidavit.

Section 3: Summary of Claim

I am asking that

□ the Court grants my Select the applicable option..

 \Box Others:

Enter details here.

<u>Notes</u>

The applicable options are: summons / Originating Application / Application.

Section 4: Affirmation

Where the facts which I have stated in the Annexure (Disclosure Table) and in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

This affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 5: Exhibit Content Page

Please refer to the Generic Affidavit (Form 54) for the exhibit content and cover pages to be included in your affidavit (where applicable).

P.2, r.17, P.9, r.5 FJ(G)R 2024

Reply to Disclosure: The Responding Party's ("R") Table

Case number: Enter the Summons no. here

I am responding to \Box Summons for Disclosure \Box Summons for Permission to seek Disclosure dated <u>Enter date here</u>.

□ To explain my response, I will rely on the previous affidavit¹ filed on Enter date here by Enter name or party type here.

 \Box I will not be relying on any affidavit².

 \Box I will rely on a <u>new</u> affidavit.

	Please tick the boxes.				Why do you disagree?		
	Do you agree or disagree:				Choose the closest reason or state other reasons. Provide a brief explanation to your		
					reason(s).		
	documents / timefram		the	(a) The disclosure is not necessary to the dispute.			
			requested timeframe and frequency?		(b) The request is excessive.(c) The document / information has been provided. State what document / information		
					was provided and where the document / information can be found.		
					(d) The applying party is able to obtain the document / information.		
No. in					(e) I am unable to obtain or do not have the document / information.		
Disclosure	Agree	Disagree	Agree	Disagree	(f) The document / information is privileged.		
Table					(g) Other reasons.		
S/No					Enter your reason and provide a brief explanation here.		
L		1	I				

¹ If you are relying on affidavit evidence, you may wish to refer to the paragraphs / page numbers in the affidavit(s) in your explanation in this Table.

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Date: Enter date here

² If you are not filing a <u>new</u> affidavit, you must affirm this document by inserting the affirmation clause on the last page.

S/No			Enter your reason and provide a brief explanation here.
S/No			Enter your reason and provide a brief explanation here.
S/No			Enter your reason and provide a brief explanation here.
S/No			Enter your reason and provide a brief explanation here.

Affirmation

Where the facts which I have stated in the Reply to Disclosure are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

Insert the affirmation clause here only if you are **<u>not</u>** filing a supporting affidavit. The Responding Party's Table is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

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Para 80(x1) 2024

Notice to Inspect

Case No.: Enter case no. here

I would like the responding party to provide the document(s) referred in the Affidavit(s):

Reference ¹	Party who filed the affidavit	Filing date of affidavit
Enter reference here.	Enter name or party type here.	Enter date here.
Enter reference here.	Enter name or party type here.	Enter date here.
Enter reference here.	Enter name or party type here.	Enter date here.

Date: Enter date here

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Sectio	on A: For the applying	party to complete.	Section B: For responding party to complete (all parts shaded).		
No.	Document required	Reference in the Affidavit (e.g. paragraph x of PA1)	Agree to provide? ²	If you agree to provide the document(s), state the place and date when the document can be inspected.If you do not agree to provide the document(s), state your reasons for objection to provide.	
S/No	Enter details here.	Enter details here.	Select an option.	Enter details here.	
S/No	Enter details here.	Enter details here.	Select an option.	Enter details here.	

¹ If there is more than 1 affidavit, assign a reference to each affidavit, e.g. PA1, PA2.

 $^{^{2}}$ To the responding party: Select "Yes" or "No" and complete the information in the right column. You are required to provide inspection to the document within **14 days** from the date of this Notice. If you fail to do so, the applying party may apply for a Court order.

S/No	Enter details here.	Enter details here.	Select an option.	Enter details here.
S/No	Enter details here.	Enter details here.	Select an option.	Enter details here.
S/No	Enter details here.	Enter details here.	Select an option.	Enter details here.

89.

P.9, r.15(3) FJ(G)R 2024

E-FORM

Summons to Inspect

This Form is used to apply to inspect document(s).

This form contains Notes for applicant to help you in the completion of the form. Please note that the Notes are \underline{NOT} to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

Section 1: Application

- 1. I am
 - □ the Applicant in Enter main case number here.
 - □ the Respondent in Enter main case number here.
 - □ Enter name or party type here in Enter main case number here.

2. This summons is filed against

- \Box the Applicant
- □ the Respondent
- Enter name or party type here.

Notes

You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

If the summons do not involve another party, you do not need to complete question 2.

If the summons is against a person who is not an existing party to the proceedings, you must provide the details of the person in Section B of the Originating Application: Generic Sections (Form 53B).

PART A

I am applying for:

- the Court to make an order to inspect
 □ all documents listed in the Notice to Inspect.

 the documents with S/No. Enter no. here in the Notice to Inspect.
- 2. the said documents to be provided within <u>Select a number</u> days from the date of this Order for inspection.
- 3. the documents are to be inspected at <u>Enter address here</u>.

The applicable options are: 7 / 14 / 21 / 28 days.

- 4. State the reliefs which you are claiming here.
- 5. State the reliefs which you are claiming here.

PART B

- 6. Costs of this summons
 - \Box Costs in the cause.
 - \Box No orders as to costs.
 - \Box Each party to bear own costs.
 - \Box Costs to be paid by
 - Enter name or party type here.
 - Costs to be reserved to Enter event here.

 \Box Others:

Enter details here.

7. Select <u>only 1</u> option.

□ The reasons / evidence for this summons are stated in the supporting affidavit.

□ I do not intend to rely on any evidence / facts and will not file a separate affidavit to support this summons.

Costs in the cause means the costs of this summons will be decided at and will depend on the outcome of the main proceedings.

If you opt to reserve costs, please state the event at which costs is to be decided e.g. reserved to the final hearing.

If the Responding Party has agreed to provide the document(s) but have not done so, you do not need to file an affidavit. You must affirm the contents of the Notice to Inspect by using Section 2.

If the Responding Party objects to provide the document(s), please file a supporting affidavit. You may use the Generic Affidavit (Form 54).

Annexure: Notice to Inspect

Please annex the completed Notice to Inspect: Form 88.

Section 2: Affirmation

Insert the affirmation clause here if you are **<u>not</u>** filing a supporting affidavit. If you are filing a supporting affidavit, you do not need to insert the affirmation clause.

Where the facts in the Notice to Inspect (for the parts completed by the applying party) are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

The summons is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

90.

Para Y(5)(a) PD 2024

E-FORM

Application for the Appointment of Expert in Respect of Custody and Access Issues

(Title as in action)

APPLICATION FOR THE APPOINTMENT OF EXPERT IN RESPECT OF CUSTODY AND ACCESS ISSUES

Note:

Please use this Form with the Generic Summons form (Form 67).

1. Orders Applied For

(a) A report is to be prepared by the expert as proposed by the □ Applicant □
 Respondent in the Expert witness table (Annexure 1) in relation to the following
 □ child □ children:

State name(s) and date(s) of birth of the child(ren) here.

- (b) The report is to be filed in court by [the date in item 10 of Annexure 1], or such later time as the court may fix, upon application by any party.
- (c) The costs of preparation of the report are to be borne in the manner proposed in item 13 of Annexure 1.
- (d) A letter in the form of the draft Letter of Instruction to Expert Witness (Child) as annexed to this application (Annexure 2) shall be sent to the expert by [to state name of party] ("the party writing to the expert") on or before [to state date], which letter shall be copied to the court and all other relevant parties [please specify] to these proceedings.
- (e) To facilitate investigations by the expert in respect of the report:
 - 1. Each party to these proceedings is to furnish to the party writing to the expert, upon request, any information which is necessary in order to enable that party to complete Schedule 1 of the draft Letter. If the contact

particulars stated in Schedule 1 change before the report is filed in court, the parties are to update the expert on the same within 3 working days of the said change(s), if this is within their knowledge.

- 2. The parties are to co-operate with the expert and comply with any and all requests made by the expert in the course of his/her investigations for the purposes of the report, including, but not limited to:
 - (i) allowing the other party free access to the child/children (notwithstanding any current orders for access or interim access) for the purpose of an interview by the expert;
 - (ii) attending all appointments made with the expert punctually;
 - (iii) allowing the child/children to be interviewed alone (i.e. not in the presence of any party), or with any other person as the expert sees fit, and otherwise examined or assessed by the expert; and
 - (iv) providing any information requested by the expert, for example, on one's educational history, family members, living arrangements.

If any of the orders in paragraph (e) above are not complied with, the expert may, unless the court otherwise orders, proceed to prepare the report with details of any party's non-compliance with the said orders, for the court's information, consideration and/or directions.

Annexure 1: Expert witness table

[Insert Annexure 1 – Expert witness table (Form 93)]

Annexure 2: Letter of Instruction to Expert Witness (Child)

[Insert Annexure 2 – Letter of Instruction to Expert Witness (Child) (Form 91)]

SCHEDULE 1—Name and Contact Particulars of Concerned Persons CASE NO.: Divorce Suit * No. [to state number]

The Applicant

	Name	Identity Card No.	Current address and contact no. during office hours*	Relationship to the child
Applicant	Enter name here	Enter Identity Card No. here	Enter address here Tel: Enter telephone number here	Enter relationship here

The Respondent

	Name	Identity Card No.	Current address and contact no. during office hours*	Relationship to the child
Respondent	Enter name here	Enter Identity Card No. here	Enter address here Tel: Enter telephone number here	Enter relationship here

The Child/Children for whom the report has been ordered (to be completed by parent having care and control of the child)

Name of the Child(ren)	Birth Cert. No.	Date of birth	Gender	Current address and contact no. during office hours*
1 Enter name here	Enter birth cert no.	Enter birth date	M/F	Enter address here
	here	here	IVI / F	Tel: Enter telephone number here
2 Enter name here	Enter birth cert no.	Enter birth date	M / F	Enter address here
	here	here		Tel: Enter telephone number here
3 Enter name here	Enter birth cert no.	Enter birth date	M / F	Enter address here
	here	here		Tel: Enter telephone number here

Other Concerned Persons

Name	Current address and contact no. during office hours*	Relationship to the child
Enter name here	Enter address here Tel: Enter telephone number here	Enter relationship here
Enter name here	Enter address here Tel: Enter telephone number here	Enter relationship here
Enter name here	Enter address here Tel: Enter telephone number here	Enter relationship here

* Parties must inform the expert if the contact address or telephone number is changed during investigation.

[Insert Schedule 2 – Note to Expert witness (Form 92)]

SCHEDULE 3—Relevant Documents

A copy of each of the documents in this Schedule is also attached.

A. List of documents which the expert may wish to consider when preparing the report

CASE NO.: Divorce Suit No [to state number]

S/No.	Document	Party who had furnished the document ¹	Date of document
1	Describe document here	Applicant / Respondent / other party	Enter date here
2	Describe document here	Applicant / Respondent / other party	Enter date here
3	Describe document here	Applicant / Respondent / other party	Enter date here
4	Describe document here	Applicant / Respondent / other party	Enter date here

B. List of court orders currently in force and related to the child(ren) in question

CASE NO.: Divorce Suit No [to state number]

S/No.	Court order	Date of court order
1	Describe Court order here	Enter date here
2	Describe Court order here	Enter date here
3	Describe Court order here	Enter date here
4	Describe Court order here	Enter date here

C. Common set of agreed or assumed facts to be relied on for your report

Include the Court-approved set of agreed or assumed facts here.

¹ Available options are: Applicant, Respondent or other party.

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Para **Y**(5)(a) PD 2024

Letter of Instruction to Expert Witness (Child)

Note:

To be used as Annexure 2 in Form 90.

Dear [To state name of expert]

Re: [Name of child/children] Divorce Suit No. [to state number] Order for Expert Report

Date by which report has been ordered to be filed in court: [to state date]

Summary of the proceedings and applications

- 1. The particulars of the persons concerned in the above proceedings are listed in Schedule 1. The proceedings consist of:
 - □ Custody and/or access issues in the ancillary matters in the divorce proceedings

State the orders sought by each party here.

□ Applications for custody and/or access in the divorce proceedings

State the numbers of the relevant Summonses and the orders sought by each party here.

Custody and/or access issues in proceedings under the Guardianship of Infants Act 1934.

Disputed child(ren) issues before the Court

2. The disputed child(ren) issues before the court are:

[To state what issues the court has to decide, for example:

- □ Whether the mother/father/third party [please specify] should have care and control of the child/children
- □ Whether the mother/father/third party [please specify] should have access/supervised access to the child/children]

Your instructions

- 3. Please read through Schedule 2 for an explanation of your duties as an expert witness.
- 4. You have the permission of the court to interview the child/children and any relevant family member[s]. The order of court is enclosed.
- 5. Please address the following issues in your report:

Insert Court-approved list of issues here.

6. If there are any other issues which, in your opinion, need to be addressed, please state them and explain why it is necessary for the court to consider these issues.

Contact persons

7. Please contact the parties directly to arrange for interviews. Please keep a careful record of all pertinent discussions with all the parties.

Completion of report

8. If at any time you anticipate that you will not be able to file your report by the deadline stipulated, please inform us promptly so that we may inform the other parties and the court if appropriate.

Factual issues

9. The relevant court documents and court orders are provided in Schedule 3. In applicable cases, a common set of agreed or assumed facts is also included in Schedule 3. You should express your opinion regarding your findings on the facts of the case, but you must not seek to resolve disputed facts as this is, of course, to be determined by the judge at the final hearing. Where appropriate, it will be of assistance if you are able to express your opinion on the basis of alternative findings regarding the factual dispute[s].

Your report

- 10. The report will be disclosed to the court and to all the other parties. Once your report has been prepared, please send a copy to:
 - The Applicant Applicant's solicitors at [to state address]
 - \Box The \Box Respondent \Box Respondent's solicitors at [to state address]
 - □ The court at The Family Justice Courts, No. 3 Havelock Square, Singapore 059725
 - The other party/parties [please specify]

Please state the case number and name of the case, i.e. [to state the case number and name of the case] in the title on the front page of your report.

Documents

- 11. We enclose with this letter:
 - \Box Schedule 1: Persons concerned;
 - \Box Schedule 2: Note to expert witness;
 - □ Schedule 3: Relevant documents;
 - \Box A copy of the court order
 - \Box giving permission to \Box interview \Box examine the child/children
 - \Box appointing you as the expert witness.

Yours etc

92.

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Note to Expert Witness

Note:

To be used as Schedule 2 in Form 90.

- 1. If you have been approached to act as an expert witness in Court proceedings or asked to prepare an expert's report for Court proceedings, you should be aware of:
 - a. Your duties to the Court as an expert witness; and
 - b. The mandatory requirements in expert reports.
- 2. These requirements are prescribed in greater detail in Part 10 of the Family Justice (General) Rules 2024 (the "Rules"). Please check with the person instructing you if you require further clarification.

Note: Your evidence may be discredited or rejected by the Court if you do not comply with Part 10 of the Rules.

Your Duties to the Court as an Expert Witness¹

- 3. It is the duty of the expert to familiarise himself with the general duties set out herein before accepting an appointment to provide an expert report or to give expert evidence.
- 4. It is the duty of the expert to assist the Court on matters within his expertise. This duty is paramount and overrides any obligation to the person from whom the expert has received instructions or by whom he is paid.
- 5. It is the duty of the expert to be independent and unbiased in the formation of his opinion. In this context, an expert will be independent if he would give the same opinion if given the same instructions by the opposing party.
- 6. In expressing his opinion, it is the duty of the expert to consider all relevant and material facts, including those which might detract from his opinion.
- 7. The expert should clearly state the literature or any other materials (if applicable) on which he has relied upon in forming his opinion and in the case when he is not able to

¹ Part 10, rules 2 and 7.

reach a definite opinion, for example because he has insufficient information, the extent to which such opinion may be provisional or qualified by further information or facts.

8. ²[When the opinion is based upon experiments or joint inspections, the expert should clearly state the methodology, results and conclusions of these experiments and joint inspections and the extent to which such information has been relied upon for his opinion.]

³[When the opinion is based upon interviews, interactions, visits, assessments or therapy, the expert should clearly state relevant observations or conclusions, and the extent to which such observations or conclusions have been relied upon for his opinion.]

- 9. It is the duty of the expert to only confine his opinion to matters which are material to the dispute between the parties and to provide opinions in relation only to matters that lie within his own expertise. An expert should make it clear when a question or issue falls outside his expertise.
- 10. If after producing a report, an expert changes his view on any material matter, such a change of view should be communicated to all parties without delay, and when appropriate, to the Court.

Mandatory Requirements in Expert Reports

- 11. You must comply with the mandatory requirements of Part 10, Rule 7 of the Rules if you are preparing an expert's report for purposes of Court proceedings. To avoid inadvertent non-compliance with the Rules, your report should follow the following format:
 - a. Please state your qualifications:
 - Relevant professional qualifications or academic qualifications (if relevant);
 - Specific training and experience; and
 - The number of times you appeared as an expert witness in litigation proceedings and the number of occasions for applicants and respondents.
 - b. Please state the issues you were asked to consider and the basis upon which evidence is given, including:

² Applicable for experts other than experts for child(ren) issues.

³ Applicable for experts on child(ren) issues.

- List the issues referred to you;
 - A statement of the common set of agreed or assumed facts provided by parties leading to your opinion; and
- What were the facts you have assumed.
- c. Please state a one-paragraph summary of your conclusions reached. Please give reasons for your conclusions.
- d. If you had to rely on the work of others:
 - Identify the literature or other material you relied on in making this report;
 - ⁴[State whether you had the opportunity to verify the literature or other material;]
 - ⁵[State whether you had the opportunity to verify *the source* of the literature or other material;]
 - State the identity and qualifications of the author of the literature or other material; and
 - Include only extracts of the literature or other material which are necessary to understand this report
- e. ⁶If you are aware of experiments, tests, examinations, inspections or surveys conducted <u>(where relevant to the disputed issues)</u>:
 - Identify the person(s) conducting those tests *etc*;
 - State the qualifications of such person(s);
 - State whether those tests were conducted under your instruction or supervision;
 - State whether you relied on those tests etc; and
 - State the extent to which your opinion may be qualified by inaccuracies or mistakes in such tests etc.
- f. ⁷(i) If there is a range of differing opinions amongst experts on the matters dealt with in your report:
 - Summarise the range you consider to be acceptable and the reasons why; and
 - Summarise the range you consider unacceptable and the reasons why.

⁴ <u>Not</u> applicable for experts on child(ren) issues. Delete accordingly.

⁵ Applicable only for experts on child(ren) issues. Delete accordingly.

⁶ If inapplicable for an expert in respect of child(ren) issues, delete accordingly.

⁷ <u>Not</u> applicable for an expert in respect of child(ren) issues.

 8 (ii) If you are aware of opinions amongst experts on the matters dealt with in your report which differ from your conclusions, please state your reasons for the difference(s) in your conclusions.

After completing your report

- g. You must make the following declaration which is:
 - a statement of belief of correctness of your opinion; and
 - a statement that you understand that in giving this report, your duty is to the Court, and that you have complied with that duty.

"I confirm that insofar as the facts stated in my report are within my own knowledge I have made clear they are and I believe them to be correct, and that the opinions I have expressed represent my accurate and complete professional opinion.

I also confirm that in preparing this report, I am aware that my primary duty is to the Court and not the person(s) from whom I have received my instructions or by whom I am paid".

⁸ Applicable only for an expert in respect of child(ren) issues.

93.

Para 9(2) PD 2024 Para Y(2) and (3) PD 2024

Expert Witness Template

Note: To be used as Annexure 1 in Form 90.

Case No.: FC/OA [prefix] [number] / [year]

Case Name: Enter case name here

Section A: General Information

S/N	Item	Applicant's position / proposed expert	Respondent's position / proposed expert	Indicate if there is an agreement between the parties (Y / N)
1.	Please list out the full name and work address of proposed expert(s) ^{1}	Enter details here	Enter details here	Y / N
2.	Please set out the proposed expert(s)'s area of expertise and discipline	Enter details here	Enter details here	Y / N
3.	Please include a brief description of the proposed expert(s)'s qualification showing that the expert has the requisite specialised knowledge on the issues referred to him or her ²		Enter details here	Y / N

¹ Please indicate the details of each proposed expert in the table. If there is more than one expert, please indicate clearly which expert you are referring to.

² Under Part 10, rule 7 of the Family Justice (General) Rules 2024, this would be included in the expert's report.

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4.	Please set out the present and past, if	Enter details here	Enter details here	Y / N
	any, relationship of proposed			
	expert(s) with any of the parties,			
	counsel and other witnesses (if any)			
5.	Please state whether the proposed	Enter details here	Enter details here	Y / N
	expert(s) was involved in the matter			
	pre-trial and the capacity in which			
	he/she was involved			

Section B: List of Issues, facts and documents

6.	Please set out the specific instructions to be given to each proposed expert(s) on which the expert(s) is to provide his/her opinion and conclusions		Enter details here	Y / N
7.	Please set out the list of issues to be referred to the expert	Enter details here	Enter details here	Y / N
8.	Please list out a full and detailed description of the facts or assumed facts ³ upon which each proposed expert(s) will consider in reaching the opinion.	Enter details here	Enter details here	Y / N

³ Applicable only if the court directs the expert to rely on a common set of agreed or assumed facts.

9.	Please state whether more than one	Enter details here	Enter details here	Y / N
	expert would be relied on for an			
	issue and provide justifications for			
	this			

Section C: Timelines

10.	Please state how much time the proposed expert(s) will require to put together their opinion	Enter details here	Y / N
11.	Please state how much time the proposed expert(s) will need if he/she testifies ⁴ (e.g. half a day, one day)	Enter details here	Y / N

Section D: Costs

12.	Please state the costs of the report, and all charges related to the appointment of the expert.	Enter details here	Y / N
13.	Please state the party(ies) who would bear the costs and the proposed payment arrangements.	Enter details here	Y / N

⁴ Applicable only if the expert is to give oral evidence.

94.

PDF UPLOAD

P.12, r.11 FJ(G)R 2024

Submission by Child Representative

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

[ID No.]

Originating Application

Between

[Applicant's name]

No. FC/OA [number]/[year]

... Applicant(s)

Sub Case No. [number]/[year]¹

And

[Respondent's name]

[ID No.]

... Respondent(s)

SUBMISSION BY CHILD REPRESENTATIVE

Section 1: General

- 1a. Date of Appointment of Child Representative: Enter date here.
- 1b. Child(ren) who are subject of these proceedings:

S/N	Name of the Child(ren)	Birth Cert. No.	Date of birth	Gender
1.	Enter name here	Enter birth cert no.	Enter birth	
		here	date here	M / F
2.	Enter name here	Enter birth cert no.	Enter birth	M / F
		here	date here	
3.	Enter name here	Enter birth cert no.	Enter birth	M / F
		here	date here	

1c. Brief facts of the Case/Chronology:

Enter details here.

¹ To insert sub-case details if relevant.

1d. Documents served on the Child Representative by parties:

Description of Documents	Filed in Court on
Describe document here	Enter date here
Describe document here	Enter date here

1e. Other relevant documents:

Description of Documents	Date of Document
Describe document here	Enter date here
Describe document here	Enter date here

Section 2: Details and Submission by Child Representative

2a. Meetings/Phone Calls with the child:

S/N	Date of meeting/ Phone Call	Venue of meeting	Brief description as to what transpired at meeting	Any other person(s) present	Person who brought child to meeting	Length of meeting/ phone call
1.	Enter date here	Enter venue here	Enter details here	Y / N	Enter details here	Enter details here
2.	Enter date here	Enter venue here	Enter details here	Y / N	Enter details here	Enter details here

2b. Meetings/Interviews/Phone Calls with any other person(s):

S/N	Date of meeting/	Name of person	Relationship with the child	Venue of meeting	Length of meeting/
	Phone Call				phone call
1.	Enter date here	Enter name here	Enter relationship here	Enter venue here	Enter details here
	Brief descrip	ption as to what tra	nspired at intervie	w/ meeting	
	Enter details	here			

2.	Enter date here	Enter name here	Enter relationship here	Enter venue here	Enter details here
	Brief descrij	ption as to what tra	nspired at intervie	w/ meeting	
	Enter details	here			

3a. Summary of Key Observations made by the Child Representative/Issues:

Enter details here.

3b. Applicable Case Law:

Enter details here.

3c. Analysis of the Issues/Basis of Proposals below:

Enter details here.	

3d. Proposed Orders/Recommendations:

Enter details here.

[If CR is unable to make any proposal, to state reason(s) why]

Name: Enter name here.

Signature:

Date: Enter date here.

95.

PDF UPLOAD

Para 8(5) PD 2024

Notice of Address for Service on Child Representative

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

[ID No.]

Originating Application

Between

No. FC/OA [number]/[year]

[Applicant's name]

Sub Case No. [number]/[year]¹

... Applicant(s)

And

[Respondent's name]

[ID No.]

... Respondent(s)

NOTICE OF ADDRESS FOR SERVICE ON CHILD REPRESENTATIVE

- 1. I have been appointed the Child Representative for your child(ren), namely [insert name of child] pursuant to the Order of Court dated [Enter date here].
- 2. Please serve on me all documents filed in Court relating to the custody care and control and access of the child(ren) by delivering a copy/copies of the same at the following address:

Enter address here.

Name of Child Representative: Enter name here

Law Firm/Employer Organisation: Enter law firm/organisation here

¹ To insert sub-case details if relevant.

96.

PDF UPLOAD

P.13, r.6 FJ(G)R 2024

Progress Summary

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

No. FC/OA [number]/[year]

Sub Case No. [number]/[year]¹

Between

[Applicant's name]

[ID No.]

... Applicant(s)

And

[Respondent's name]

[ID No.]

... Respondent(s)

PARENTING COORDINATION PROGRAMME PROGRESS SUMMARY

Section 1: Case Information

Court Order No	Enter Court order no. here.
Date of Order	Enter date here
Duration of Appointment	Enter duration here
Sessions scheduled	Father: Enter no. of sessions here
(Indicate number of sessions	Notice. Litter no. of sessions nere
scheduled, including joint sessions)	Child(ren): Enter no. of sessions here
Sessions attended	Father: Enter no. of sessions here
(Indicate number of sessions	Mother: Enter no. of sessions here
attended, including joint sessions)	Child(ren): Enter no. of sessions here

Section 2: Information on Parents and Child(ren)

¹ To insert sub-case details if relevant.

Parent/Child(ren) ²	Name	Age
Father / Mother / Child	Enter name of party/child(ren) here.	Enter age of party/ Child(ren) here.
Father / Mother / Child	Enter name of party/child(ren) here.	Enter age of party/ Child(ren) here.
Father / Mother / Child	Enter name of party/child(ren) here.	Enter age of party/ Child(ren) here.

Section 3: Reasons for Parenting Coordinator's ("PC") Appointment

E.g. Why did the Court appoint a PC? What did the Court want the PC to work on with the parties?

Section 4: Issues or Areas Worked On

E.g. What were the specific issues raised and discussed? Etc.

Section 5: Proposals Made by The PC

² Available options are: Father, Mother, Child.

E.g. What were the proposals made or options given by the PC to the parties to address the issues, including the advice (if any) given by the PC to the parties?

Section 6: Parties Responses to the PC's Proposals

For every proposal / option in Section 5, indicate if the parties agreed or disagreed (without elaborating on the reasons). Where the parties disagreed but suggested alternatives, state the alternatives, without elaborating on the reasons.

Section 7: Proposed Next Steps That Were Discussed

E.g. What were the proposed next steps the PC discussed with parties to help them move forward?

Please tick one

To continue with Parenting Coordination programme (*please state brief reasons*)

Enter reasons here

To discontinue with Parenting Coordination programme (*please state brief reasons*)

Enter reasons here

Progress Summary submitted by:

Name of Parenting Coordinator:	Enter name here
Telephone number:	Enter telephone no. here
Email address:	Enter email address here
Signature of Parenting Coordinator:	
Date:	Enter date here

97.

PDF UPLOAD

Para 8A(2) PD 2024

Notice of Acceptance / Non-Acceptance by Parenting Coordinator

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Originating Application

Between

No. FC/OA [number]/[year]

Sub Case No. [number]/[year]¹

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

NOTICE OF ACCEPTANCE/NON-ACCEPTANCE BY PARENTING COORDINATOR

To: Registrar

Family Justice Courts

I, [state name], hereby notify the Court of the following:

□ I accept the appointment as Parenting Coordinator.

I am not aware of any conflict, circumstance, or reason that renders me unable to serve as the Parenting Coordinator in this matter and I will immediately inform the court and the parties if such arises.

I do not accept the appointment as Parenting Coordinator.

Reason: Enter reason here.

Name: Enter name here. Signature: Date: Enter date here.

¹ To insert sub-case details if relevant.

98.

PDF UPLOAD

P.14, r.1(8) FJ(G)R 2024 Para 84(1)(b) PD 2024

Injunction Prohibiting Disposal of Assets in Singapore

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

INJUNCTION PROHIBITING DISPOSAL OF ASSETS IN SINGAPORE

Date of order:	Enter date here.
Hearing Judge:	Select the applicable option ² Enter name of judicial officer here.
Parties present:	□ Applicant □ Applicant's counsel
	□ Respondent □ Respondent's counsel
	□ Others. Enter party type/details here.
	\Box Hearing on paper. No parties are present. ³
	\Box Without notice. ⁴
17	
Venue:	□ Family Justice Courts □ Supreme Court
	□ Open court □ Chambers Enter court / chamber no. here.

¹ To insert sub-case details if relevant.

² The applicable options are: Assistant Registrar / Judge / Judicial Commissioner / District Judge / Deputy Registrar / Magistrate / Registrar / Others.

³ Applicable if the Court dealt with the summons / application without an oral hearing.

⁴ Applicable only if the summons / application is without notice, i.e. there is no responding party / Respondent.

Case no. (including Enter case / summons no. and type of hearing here. Summons no.) and type of hearing:

To: The respondent

- 1. This order prohibits you from dealing with your assets up to the amount stated. The order is subject to the exceptions stated at the end of the order. You should read all the terms of the order very carefully. You are advised to consult a solicitor as soon as possible. You have a right to ask the Court to vary or discharge this order.
- 2. If you disobey this order you will be guilty of contempt of Court and may be sent to prison or fined.

THE ORDER

Disposal of assets

- (a) The respondent must not remove from Singapore in any way dispose of or deal with or diminish the value of, any of his/her assets which are in Singapore whether in his/her own name or not and whether solely or jointly owned up to the value \$[Enter amount here].
 - (b) This prohibition includes the following assets, in particular:
 - (i) the property known as [Enter address here] or the net sale money after payment of any mortgages if it has been sold;
 - (ii) the property and assets of the respondent's business known as [Enter details here] (or carried on at [Enter address here]) or the sale money if any of them have been sold; and
 - (iii) any money in the accounts numbered [Enter details here] at [Enter details here].
 - (c) If the total unencumbered value of the respondent's assets in Singapore exceeds \$[Enter amount here], the respondent may remove any of those assets from Singapore or may dispose of or deal with them so long as the total unencumbered value of his assets still in Singapore remain not less than \$[Enter amount here].

Disclosure of information

2. The respondent must inform the applicant in writing at once of all his/her assets in Singapore whether in his/her own name or not and whether solely or jointly owned, giving the value, location and details of all such assets. The information must be confirmed in an affidavit which must be served on the applicant's solicitors within [Enter no. here] days after this order has been served on the respondent.

EXCEPTIONS TO THIS ORDER

- 3. This order does not prohibit the respondent from spending \$[Enter amount here] a week towards his/her ordinary living expenses and also \$[Enter amount here] a week (or a reasonable sum) on legal advice and representation. But before spending any money the respondent must tell the applicant's solicitors where the money is to come from.
- 4. This order does not prohibit the respondent from dealing with or disposing of any of his/her assets in the ordinary and proper course of business. The respondent must account to the applicant [state interval here] for the amount of money spent in this regard.
- 5. The respondent may agree with the applicant's solicitors that the above spending limits should be increased or that this order should be varied in any other respect but any such agreement must be in writing.

EFFECT OF THIS ORDER

- 6. A respondent who is an individual who is ordered not to do something must not do it himself/herself or in any other way. He/She must not do it through others acting on his/her behalf or on his/her instructions or with his/her encouragement.
- 7. A respondent which is a corporation and which is ordered not to do something must not do it itself or by its directors, officers, employees or agents or in any other way.

THIRD PARTIES

Effect of this order

8. It is a contempt of Court for any person notified of this order knowingly to assist in or permit a breach of the order. Any person doing so may be sent to prison or fined.

Set-off by banks

9. This injunction does not prevent any bank from exercising any right of set off it may have in respect of any facility which it gave to the respondent before it was notified of the order.

Withdrawals by the respondent

10. No bank need enquire as to the application or proposed application of any money withdrawn by the respondent if the withdrawal appears to be permitted by this order.

⁵SERVICE OUT OF THE JURISDICTION AND SUBSTITUTED SERVICE

11. (a) The applicant may serve the originating application on the respondent at [Enter address/details here] by [Enter mode of service here].

⁵ Include this paragraph where applicable.

(b) If the respondent wishes to defend the action, the respondent should refer to the Notice of Proceedings annexed to the originating application for information on the steps to take.

UNDERTAKINGS

12. The applicant gives to the Court the undertakings set out in Schedule 1 to this order.

DURATION OF THIS ORDER

13. This order will remain in force until the trial or further order.

VARIATION OR DISCHARGE OF THIS ORDER

14. The respondent (or anyone notified of this order) may apply to the Court at any time to vary or discharge this order (or so much of it as affects that person), but anyone wishing to do so must inform the applicant's solicitors.

NAME AND ADDRESS OF APPLICANT'S SOLICITORS

15. The applicant's solicitors are:-

Name of lawyer(s) having conduct of action or charge of matter Name of law firm. Address of law firm. Email: Enter email address here Tel: Enter telephone no. here. Ref: Enter file reference of law firm here.

INTERPRETATION OF THIS ORDER

- 16. (a) In this order references to "he", "him" or "his" include "she" or "her" and "it" or "its".
 - (b) Where there are 2 or more respondents then (unless the context indicates differently)
 - (i) References to "the respondents" mean both or all of them;
 - (ii) An order requiring "the respondents" to do or not to do anything requires each respondent to do or not to do the specified thing; and
 - (iii) A requirement relating to service of this order or of any legal proceedings on "the respondents" means service on each of them.

SCHEDULE 1

Undertakings given to the Court by the applicant

- 1. If the Court later finds that this order has caused loss to the respondent, and decides that the respondent should be compensated for that loss, the applicant will comply with any order the Court may make.
- 2. The applicant, in respect of any order the Court may make pursuant to paragraph (1) above, will:
 - (a) on or before [Enter date here] provide to the respondent security in the sum of \$[Enter amount here] by causing

 \Box payment to be made into Court

 \Box a bond to be issued by an insurance company with a place of business within Singapore

 \Box a written guarantee to be issued from a bank with a place of business within Singapore

 \Box payment to the applicant's solicitor to be held by the solicitor as an officer of the Court pending further order

and

- (b) cause evidence of the provision of security to be extended to the respondent immediately after the security has been put up.
- 3. As soon as practicable the applicant will (issue and) serve on the respondent (an) (the) originating application (in the form of the draft originating application produced to the Court) (claiming appropriate relief) together with this order.
- 4. The applicant will cause an affidavit to be sworn and filed (substantially in the terms of the draft affidavit produced to the Court) (confirming the substance of what was said to the Court by the applicant's solicitors).
- 5. As soon as practicable the applicant will serve on the respondent a copy of the affidavits and exhibits containing the evidence relied on by the applicant.
- 6. Anyone notified of this order will be given a copy of it by the applicant's solicitors.
- 7. The applicant will pay the reasonable costs of anyone other than the respondent which have been incurred as a result of this order including the costs of ascertaining whether that person holds any of the respondent's assets and if the Court later finds that this order has caused such person loss, and decides that such person should be compensated for that loss, the applicant will comply with any order the Court may make.
- 8. If this order ceases to have effect, the applicant will immediately take all reasonable steps to inform in writing anyone to whom he/she has given notice of this order, or who he/she has reasonable grounds for supposing may act upon this order, that it has ceased to have effect.

99.

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P.14, r.1(9) FJ(G)R Para 84(1)(a) PD

Injunction Prohibiting Disposal of Assets Worldwide

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

INJUNCTION PROHIBITING DISPOSAL OF ASSETS WORLDWIDE

Date of order:

Enter date here.

Hearing Judge: Select the applicable option² Enter name of judicial officer here.

 \Box Respondent \Box Respondent's counsel

□ Others. Enter party type/details here.

 \Box Hearing on paper. No parties are present.³

¹ To insert sub-case details if relevant.

² The applicable options are: Assistant Registrar / Judge / Judicial Commissioner / District Judge / Deputy Registrar / Magistrate / Registrar / Others.

³ Applicable if the Court dealt with the summons / application without an oral hearing.

\Box Without notice.⁴

Venue:	□ Family Justice Courts □ Supreme Court
--------	---

□ Open court □ Chambers Enter court / chamber no. here.

Case no. (including	Enter case / summons no. and type of hearing here.
Summons no.) and	
type of hearing:	

To: The respondent

- 3. This order prohibits you from dealing with your assets up to the amount stated. The order is subject to the exceptions stated at the end of the order. You should read all the terms of the order very carefully. You are advised to consult a solicitor as soon as possible. You have a right to ask the Court to vary or discharge this order.
- 4. If you disobey this order you will be guilty of contempt of Court and may be sent to prison or fined.

THE ORDER

Disposal of assets

- 1. (a) The respondent must not:
 - (i) remove from Singapore any of his/her assets which are in Singapore whether in his/her own name or not and whether solely or jointly owned up to the value of \$[Enter amount here]; or
 - (ii) in any way dispose of or deal with or diminish the value of any of his/her assets whether they are in or outside Singapore whether in his/her own name or not and whether solely or jointly owned up to the same value.
 - (b) This prohibition includes the following assets, in particular:-
 - (i) the property known as [Enter address here] or the net sale money after payment of any mortgages if it has been sold;
 - (ii) the property and assets of the respondent's business known as [Enter details here] (or carried on at [Enter address here]) or the sale money if any of them have been sold; and

⁴ Applicable only if the summons / application is without notice, i.e. there is no responding party / Respondent.

- (iii) any money in the accounts numbered [Enter details here] at [Enter details here].
- (c) If the total unencumbered value of the respondent's assets in Singapore exceeds \$[Enter amount here] the respondent may remove any of those assets from Singapore or may dispose of or deal with them so long as the total unencumbered value of his/her assets still in Singapore remains not less than \$[Enter amount here]. If the total unencumbered value of the respondent's assets in Singapore does not exceed \$[Enter amount here], the respondent must not remove any of those assets from Singapore and must not dispose of or deal with any of them, but if he/she has other assets outside Singapore the respondent may dispose of or deal with those assets so long as the total unencumbered value of all his/her assets whether in or outside Singapore remains not less than \$[Enter amount here].

Disclosure of information

2. The respondent must inform the applicant in writing at once of all his assets whether in or outside Singapore and whether in his own name or not and whether solely or jointly owned, giving the value, location and details of all such assets. The information must be confirmed in an affidavit which must be served on the applicant's solicitors within [] days after this order has been served on the respondent.

EXCEPTIONS TO THIS ORDER

- 3. This order does not prohibit the respondent from spending \$[Enter amount here] a week towards his/her ordinary living expenses and also \$[Enter amount here] a week (or a reasonable sum) on legal advice and representation. But before spending any money the respondent must tell the applicant's solicitors where the money is to come from.
- 4. This order does not prohibit the respondent from dealing with or disposing of any of his/her assets in the ordinary and proper course of business. The respondent must account to the applicant [state interval here] for the amount of money spent in this regard.
- 5. The respondent may agree with the applicant's solicitors that the above spending limits should be increased or that this order should be varied in any other respect but any such agreement must be in writing.

EFFECT OF THIS ORDER

- 6. A respondent who is an individual who is ordered not to do something must not do it himself/herself or in any other way. He/She must not do it through others acting on his/her behalf or on his/her instructions or with his/her encouragement.
- 7. A respondent which is a corporation and which is ordered not to do something must not do it itself or by its directors, officers, employees or agents or in any other way.

THIRD PARTIES

Effect of this order

8. It is a contempt of Court for any person notified of this order knowingly to assist in or permit a breach of the order. Any person doing so may be sent to prison or fined.

Effect of this order outside Singapore

- 9. The terms of this order do not affect or concern anyone outside the jurisdiction of this Court until it is declared enforceable or is enforced by a Court in the relevant country and then they are to affect him/her only to the extent they have been declared enforceable or have been enforced UNLESS such person is:
 - (a) a person to whom this order is addressed or an officer or an agent appointed by power of attorney of such a person; or
 - (b) a person who is subject to the jurisdiction of this Court; and
 - (i) has been given written notice of this order at him/her residence or place of business within the jurisdiction of this Court; and
 - (ii) is able to prevent acts or omissions outside the jurisdiction of this Court which constitute or assist in a breach of the terms of this order.

Assets located outside Singapore

- 10. Nothing in this order will, in respect of assets located outside Singapore, prevent any third party from complying with:
 - (a) what it reasonably believes to be its obligations, contractual or otherwise, under the laws and obligations of the country or state in which those assets are situated or under the proper law of any contract between itself and the respondent; and
 - (b) any orders of the Courts of that country or state, provided that reasonable notice of any application for such an order is given to the applicant's solicitor.

Set-off by banks

11. This injunction does not prevent any bank from exercising any right of set off it may have in respect of any facility which it gave to the respondent before it was notified of the order.

Withdrawals by the respondent

12. No bank need enquire as to the application or proposed application of any money withdrawn by the respondent if the withdrawal appears to be permitted by this order.

⁵SERVICE OUT OF THE JURISDICTION AND SUBSTITUTED SERVICE

⁵ Include this paragraph where applicable.

- 13. (a) The applicant may serve the originating application on the respondent at [Enter address/details here] by [Enter mode of service here].
 - (b) If the respondent wishes to defend the action, the respondent should refer to the Notice of Proceedings annexed to the originating application for information on the steps to take.)

UNDERTAKINGS

14. The applicant gives to the Court the undertakings set out in Schedule 1 to this order.

DURATION OF THIS ORDER

15. This order will remain in force until the trial or further order.

VARIATION OR DISCHARGE OF THIS ORDER

16. The respondent (or anyone notified of this order) may apply to the Court at any time to vary or discharge this order (or so much of it as affects that person), but anyone wishing to do so must inform the applicant's solicitors.

NAME AND ADDRESS OF APPLICANT'S SOLICITORS

17. The applicant's solicitors are:-

Name of lawyer(s) having conduct of action or charge of matter Name of law firm. Address of law firm. Email: Enter email address here Tel: Enter telephone no. here. Ref: Enter file reference of law firm here.

INTERPRETATION OF THIS ORDER

- 18. (a) In this order references to "he", "him" or "his" include "she" or "her" and "it" or "its".
 - (b) Where there are 2 or more respondents then (unless the context indicates differently)
 - (i) References to "the respondents" mean both or all of them;
 - (ii) An order requiring "the respondents" to do or not to do anything requires each respondent to do or not to do the specified thing; and
 - (iii) A requirement relating to service of this order, or of any legal proceedings, on "the respondents" means service on each of them.

SCHEDULE 1

Undertakings given to the Court by the applicant

- 1. If the Court later finds that this order has caused loss to the respondent, and decides that the respondent should be compensated for that loss, the applicant will comply with any order the Court may make.
- 2. The applicant, in respect of any order the Court may make pursuant to paragraph (1) above, will:
 - (a) on or before [date] provide to the respondent security in the sum of \$ [] by causing [payment to be made into Court / a bond to be issued by an insurance company with a place of business within Singapore / a written guarantee to be issued from a bank with a place of business within Singapore / payment to the applicant's solicitor to be held by the solicitor as an officer of the Court pending further order]*; and
 - (b) cause evidence of the provision of security to be extended to the respondent immediately after the security has been put up.
- 3. As soon as practicable the applicant will (issue and) serve on the respondent (an) (the) originating application (in the form of the draft originating application produced to the Court) (claiming appropriate relief) together with this order.
- 4. The applicant will cause an affidavit to be sworn and filed (substantially in the terms of the draft affidavit produced to the Court) (confirming the substance of what was said to the Court by the applicant's solicitors).
- 5. As soon as practicable the applicant will serve on the respondent a copy of the affidavits and exhibits containing the evidence relied on by the applicant.
- 6. Anyone notified of this order will be given a copy of it by the applicant's solicitors.
- 7. The applicant will pay the reasonable costs of anyone other than the respondent which have been incurred as a result of this order including the costs of ascertaining whether that person holds any of the respondent's assets and if the Court later finds that this order has caused such person loss, and decides that such person should be compensated for that loss, the applicant will comply with any order the Court may make.
- 8. If this order ceases to have effect, the applicant will immediately take all reasonable steps to inform in writing anyone to whom he has given notice of this order, or who he has reasonable grounds for supposing may act upon this order, that it has ceased to have effect.
- (9. The applicant will not without the permission of the Court begin proceedings against the respondent in any other jurisdiction or use information obtained as a result of an order of the Court in this jurisdiction for the purpose of civil or criminal proceedings in any other jurisdiction.

10. The applicant will not without the permission of the Court seek to enforce this order in any country outside Singapore (or seek an order of a similar nature including orders conferring a charge or other security against the respondent or the respondent's assets).)*

(**Use as appropriate*)

100.

P.14, r.5(3)(b) FJ(G)R 2024

Receiver's Security by Undertaking

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹

Between

[Applicant's name] [ID No.]

... Applicant(s)

PDF UPLOAD

And

[Respondent's name] [ID No.]

... Respondent(s)

RECEIVER'S SECURITY BY UNDERTAKING

Case / Application No.: Enter case / application no. here.

I, [Enter name here], of [Enter address here], the receiver \Box and manager

appointed by order dated [Enter date here]

 \Box proposed to be appointed

in this action hereby undertake with the Court to duly account for all moneys and property received by me as such \Box receiver \Box (and) manager or for which I may be held liable and to pay the balances from time to time found due from me and to deliver any property received by me as such \Box receiver \Box (and) manager at such times and in such manner in all respects as the Court or a Judge shall direct.

And we [Enter name(s) here] hereby \Box jointly and severally²

undertake with the Court to be answerable for any default by the said [Enter name of receiver and/or manager here] as such \Box receiver \Box (and) manager and upon such default to pay to any person or persons or otherwise as the Court or a Judge shall direct any sum or sums not exceeding in the whole \$[Enter sum here] that may from time to time be certified by the Registrar to be due from the receiver and we submit to the jurisdiction of the Court in this action to determine any claim made under this undertaking.

Date: Enter date here

¹ To insert sub-case details if relevant.

² Do not tick checkbox in the case of a Guarantee or other Company.

Signatures of receiver and his/her surety or sureties.

In the case of a surety being a guarantee or other company, it must be sealed or otherwise duly executed.

101.

E-FORM

P.15, r.5, r.16, r.19 FJ(G)R 2024

Pre-Trial Forms

This set contains the following Forms:

Name of Form	When do you use the Form?	Annex
Request for an Order to Attend Court	 Only if a hearing date has been given. For an incarcerated party to attend any Court event. For a witness to attend trial only. <u>NOT</u> to be used for matters with any of these prefixes: a) MSS, SS, BOSCO, AEO, FCNS, APP. b) Starting with "VA". c) Ending with "MO". 	<u>Annex A</u>
Notice to Refer to Affidavit(s)	For any Court hearing.	<u>Annex B</u>
Notice of Objections to the Affidavit(s) of Evidence-in- Chief	If the Court hearing is a trial.	<u>Annex C</u>
Notice to Refer to Pre-Trial Examination.	 If the Court hearing is a trial. <u>NOT</u> to be used for matters with any of these prefixes: a) MSS, SS, BOSCO, AEO, FCNS, APP. b) Starting with "VA". c) Ending with "MO". If the Court hearing is a trial. 	Annex D Annex E
Evidence under Section 32(1) of the Evidence Act 1893	n me Court nearnig is a trial.	Annex E

How to use the Forms?

Complete Section 1 and the required Annex(es). You may include as many Annex(es) as you need.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

Section 1: The Relevant Case(s)

- 1. I am
 - the Applicant in <u>Enter case number here</u>.
 - the Respondent in <u>Enter case number here</u>.
 - Enter name or party type here in Enter case number here.

2. State all other case(s) which will be heard together in the same Court sitting:

Enter case number(s) here.

Notes

You may refer to the Originating Application for your party type.

Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

Annex A: Request for an Order to Attend Court

□ I require the Court to issue an Order to Attend Court.

Complete the information below.

A	Identify the nature of hearing	 Trial Case Conference Chamber hearing Mediation
В	State place of hearing	□ Family Court: □ Havelock □ MND
		□ High Court
		□ Court □ Chambers No.: Enter no. here.
		□ Virtual platform: Enter platform here.
С	Date and time of hearing	Date:Enter date here.Time:Enter time here.
The V	Witness	
1.	Name of the witness:	Enter witness's full name here.
2.	Address of the witness:	Enter witness's address here.
2a.	Is the witness incarcerated?	□ No. □ Yes. Please acknowledge 2b.
2b. □ By signing this Form, I agree to pay the reasonable expenses of transporting and maintaining the witness and the officer to and from the prison if required to do so.		
3.	Relationship of the witness to any party in the case:	State the relationship here.
4.	If witness is to appear in his/her official or professional capacity,	Enter the details here. Otherwise, select "Not Applicable".
	please state his/her capacity and his/her organisation.	□ Not applicable
If the	witness requires interpretation in Malay, Mando	arin, Tamil or Chinese dialects (Cantonese, Hakka, Hokkien

If the witness requires interpretation in Malay, Mandarin, Tamil or Chinese dialects (Cantonese, Hakka, Hokkien or Teochew), file a **Request for Hearing Administrative Support** for the Court to provide a translator in these languages.

For all other languages, the party seeking to call the witness should arrange for the interpreter to attend Court at the party's own costs.

The Evidence

5.	What evidence is the witness required to give?	You may select more than one option.
		 Oral evidence. Briefly state the evidence in question 6a. Document(s). State the documents in question 6b.
ба.	Briefly state the evidence:	Enter the details here.
6b.	Identify the document(s) to be produced:	Enter the details here.
7.	State why the evidence is relevant to the trial:	Enter the details here.
8.	State any other relevant information (e.g. witness's availability):	Enter the details here.

Х

Signature of

□ Applicant □ Respondent □ Enter party type here.

\Box Counsel for the \Box Applicant \Box Respondent \Box Enter party type here.

Enter name of lawyer and law firm here.

Filing date of Notice:

Annex B: Notice to Refer to Affidavit(s)

I wish to refer to the affidavit(s) in other proceeding(s) below.

If you are filing this Notice into eLitigation and referring to a case number starting with these prefixes, a) MSS, SS, BOSCO, AEO, FCNS, APP;

b) Starting with "VA"; or

c) Ending with "MO"

you must re-file the document(s) into the eLitigation case file.

Case No.	Document description (Eg. [name]'s affidavit)	Date of document ¹	State the part(s) of the document which you are referring to:
Enter case	Enter description of	Enter date	Enter the details here.
no. here.	document here.	here.	
Enter case	Enter description of	Enter date	Enter the details here.
no. here.	document here.	here.	
Enter case	Enter description of	Enter date	Enter the details here.
no. here.	document here.	here.	
Enter case	Enter description of	Enter date	Enter the details here.
no. here.	document here.	here.	
Enter case	Enter description of	Enter date	Enter the details here.
no. here.	document here.	here.	

Х

Signature of

□ Applicant □ Respondent □ Enter party type here.

□ Counsel for the □ Applicant □ Respondent □ Enter party type here.

Enter name of lawyer and law firm here.

Filing date of Notice:

¹ Provide the filing date of the affidavit if that is known. Otherwise, you may refer to the date of the signing / affirmation of the affidavit or the date of the document (if it is an unsworn statement).

Annex C: Notice of Objections to the Affidavit(s) of Evidence-in-Chief

I object to the Affidavit of Evidence-in-Chief ("AEIC") as detailed in the table below:

Use a separate table for each AEIC.

Person who filed the affidavit:	Enter full name of the person here.
Date of affidavit:	Enter date here.
State the parts of the affidavit which you object to:	Brief reasons: (E.g. without prejudice communications, hearsay)
Enter the details here.	Enter the reasons here.
Enter the details here.	Enter the reasons here.
Enter the details here.	Enter the reasons here.
Enter the details here.	Enter the reasons here.
Enter the details here.	Enter the reasons here.

Х

Signature of

□ Applicant □ Respondent □ Enter party type here.

□ Counsel for the □ Applicant □ Respondent □ Enter party type here.

Enter name of lawyer and law firm here.

Filing date of Notice:

Annex D: Notice to Refer to Pre-Trial Examination

The Court has allowed the evidence to be taken in a pre-trial examination. I wish to refer to the evidence in the pre-trial examination.

Complete the information below.

Date of order approving the pre-trial examination:	Enter date here.
Name of witness:	Enter witness's full name here.
Date and place of pre-trial examination:	Enter date here. Enter place of pre-trial examination here.

Signature of

□ Applicant □ Respondent □ Enter party type here.

□ Counsel for the □ Applicant □ Respondent □ Enter party type here.

Enter name of lawyer and law firm here.

Filing date of Notice:

Annex E: Notice of Admitting Hearsay Evidence under Section 32(1) of the Evidence Act 1893

□ The maker of the statement is not available to give evidence but I intend to ask the Court to admit the statement under section 32(1) of the Evidence Act 1893. *Complete the information below.*

1.	Identify which part of section	Section 32(1)
	32(1) of the Evidence Act	$\Box (a) \Box (b) \Box (c) \Box (d) \Box (e)$
	1893 you are proceeding on:	$\Box (f) \Box (g) \Box (h) \Box (i) \Box (j)$
2.	Name of maker of the	Enter full name of the maker here.
	statement:	
3.	Address of the maker:	Enter address of the maker here. Otherwise, please
		select the applicable option below.
		If address is provided, skip to question 5.
		\Box The maker is deceased. The date of death is:
		Enter date here. If this option is selected, skip to question 5.
		If this option is selected, skip to question 5.
		\Box The maker cannot be found.
		If this option is selected, proceed to question 4.
4		
4.	Details of the maker's last appearance	
	Date:	Enter date here.
	Location:	Enter location here.
	Who was involved:	Enter the details here.
	Circumstances:	Enter the details here.
5.	Is the statement which you are	submitting in oral or written form?
	\Box Oral. \Box Written. \Box Oral and	d written.
If ora	al statement,	
6.		Enter full name of the person here.
	the statement?	
	Provide the address of this	Enter address of the person here.
	person.	T
7.	Time and place when the statement was made:	Enter the details here.
	statement was made.	

8.	Description of statement	 I set out the oral statement and, as far as possible, state the actual words used by the maker: in the additional page to this Form. in the affidavit of Enter full name of the maker of the affidavit here dated Enter date here.
If wi	itten statement,	
9.	Is the maker of statement the same as the maker of the document?	 Yes. No. Provide the details below. State name of maker of document: Enter full name of the maker here. State address of maker: Enter address of the maker here. If maker of document is deceased, date of death: Enter date here.
10.	Time and place at which the statement is made:	Enter the details here.
11.	Description of statement	 The written statement is attached. The written statement is contained in the affidavit of Enter full name of the maker of the affidavit here dated Enter date here.

Х

Signature of

□ Applicant □ Respondent □ Enter party type here.

 \Box Counsel for the \Box Applicant \Box Respondent \Box Enter party type here.

Enter name of lawyer and law firm here.

Filing date of Notice:

102.

P.15, r.5 FJ(G)R 2024

E-FORM

Order to Attend Court

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

(Title as in action)

ORDER TO ATTEND COURT

To: [Name of witness / Superintendent of Prisons] [Address of witness]¹

This serves as a NOTICE to [Name of witness] \Box (incarcerated) to attend Court.

This NOTICE is valid from the date of the hearing until the end of the hearing (which shall include any adjourned hearing).

Date and time of hearing:	[C] of Request for an Order to Attend Court	
	(Form 101 Annex A) ("Request")	
Place of hearing:	[B] of Request	
Nature of hearing:	[A] of Request	
If witness is to appear in his/her	[4] of Request	
official or professional capacity,		
please state his/her capacity and		
his/her organisation.		
What evidence is the witness	\Box Oral evidence. [5] of Request	
required to give?	\Box Document(s).	
The evidence is to be given on	□ Applicant [Section 1 of Request]	
behalf of	□ Respondent	
	□ Others:	
Identify the document(s) to be	[6B] of Request	
produced:		
[If 2B of Request is selected]		
The [Enter name of requesting party] agrees to pay the reasonable expenses of		
transporting and maintaining the witness and the officer to and from the prison		

transporting and maintaining the witness and the officer to and from the prison.

Note: If you are only required to produce documents and you ensure that all the documents required are produced in accordance with this Order, you need not attend Court personally.

²This order to attend court is sufficient authority as an order under section 38 of the Prisons Act 1933 for the Superintendent to produce the named person in Court at the time and place

¹ Not required for incarcerated witness.

² To be used only if the witness is incarcerated.

stated. The requesting party undertakes to pay upon request the costs to be incurred by the prison in complying with the order to attend court.

103.

E-FORM

P.15, r.6(1), 8(4) FJ(G)R 2024

Order for Issue of Letter of Request to Relevant Authority Out of Jurisdiction

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

(Title as in action)

ORDER FOR ISSUE OF LETTER OF REQUEST TO RELEVANT AUTHORITY OUT OF JURISDICTION

Date of order:	Enter date here.
Hearing Judge:	Select the applicable option ¹ Enter name of judicial officer here.
Parties present:	□ Applicant □ Applicant's counsel
	□ Respondent □ Respondent's counsel
	□ Others. Enter party type/details here.
	\Box Hearing on paper. No parties are present. ²
	\Box Without notice. ³
Venue:	□ Family Justice Courts □ Supreme Court
	□ Open court □ Chambers Enter court / chamber no. here.
Case no. (including Summons no.) and type of hearing:	Enter case / summons no. and type of hearing here.

Orders made:

1. Upon the application of [state the party] and upon reading the affidavit of [state the name of the person making the affidavit and the filing date] and upon hearing [solicitor for the party] and that the Court wishes to obtain the testimony of [name of person] for the proceedings [specify case number and Court].

¹ The applicable options are: Assistant Registrar / Judge / Judicial Commissioner / District Judge / Deputy Registrar / Magistrate / Registrar / Others.

² Applicable if the Court dealt with the summons / application without an oral hearing.

³ Applicable only if the summons / application is without notice, i.e. there is no responding party / Respondent.

2. It is ordered that a letter of request is to be issued, directed to the relevant authority for permission for evidence to be given by live video or live television link by the following witnesses, namely:

[State name and address of person].

3. And it is ordered that the costs of and incidental to the application for this order and the said letter of request and giving of evidence [state costs order made].

Notes:

- 1. The person or entity served with this judgment/order and who/which has been ordered to pay money, to do or not to do any act must comply immediately or within the time specified in the judgment/order, if any.
- 2. Failure to comply may result in enforcement of judgment/order proceedings, including contempt of Court proceedings, against the said person or entity.

P.15, r.6(5), r.8(5)(a) FJ(G)R 2024

Letter of Request for Examination of Witness Out of Jurisdiction / Permission for Evidence to be Given by Live Video or Live Television by Witness Out of Jurisdiction

Request is valid only if engrossed with the seal of the Court and signature of the Registrar

1.	Sender	Enter details here
2.	Central Authority of the Requested State	Enter details here
3.	Person to whom the executed request is to be returned	Enter details here
4.	Specification of the date by which the requesting authority requires receipt of the response to the Letter of Request	
	Date	Enter date here
	Reason for urgency*	Enter details here
5a.	Requesting authority	Enter details here
5b.	To the Competent Authority of	Enter details here
5c.	Names of the case and any identifying number	, Enter details here
6.	Names and addresses of th representatives in the Requested	e parties and their representatives (including State [*])
ба.	Plaintiff/Claimant/Applicant	Enter details here
	Representatives	Enter details here
6b.	Defendant/Respondent	Enter details here
	Representatives	Enter details here
6с.	Other parties	Enter details here

	Representatives	Enter details here
7a.	Nature of the proceedings (divorce, paternity, breach of contract, product liability, etc.)	Enter details here
7b.	Summary of complaint	Enter details here
7c.	Summary of defence and counterclaim [*]	Enter details here
7d.	Other necessary information or documents [*]	Enter details here
8a.	Evidence to be obtained or other judicial act to be performed	Enter details here
8b.	Purpose of the evidence or judicial act sought	Enter details here
9.	Identity and address of any person to be examined [*]	Enter details here
10.	Questions to be put to the persons to be examined or statement of the subject matter about which they are to be examined [*]	Enter details here
11.	Documents or other property to be inspected [*]	Enter details here
12.	Any requirement that the evidence be given on oath or affirmation and any special form to be used [*]	Enter details here
13.	Special methods or procedure to be followed (e.g., oral or in writing, verbatim transcript or summary, cross-examination, etc.)*	Enter details here
14.	Request for notification of the time and place for the execution of the Request and identity and	Enter details here

	address of any person to be notified*	
15.	Request for attendance or participation of judicial personnel of the requesting authority at the execution of the Letter of Request [*]	Enter details here
16.	Specification of privilege or duty to refuse to give evidence under the law of the Requesting State [*]	Enter details here
17.	The fees and costs incurred which are reimbursable will be borne by [*]	Enter details here

*Use as appropriate

Date of Request: Enter date here

105.

PDF UPLOAD

P.15, r.6(8), r.8(5)(b) FJ(G)R 2024

Undertaking as to Expenses

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

UNDERTAKING AS TO EXPENSES

- 1. I I We, [name of party or solicitor], hereby undertake to be responsible for all expenses incurred by an issuing authority or transmitting authority in respect of the letter of request issued herein on [state date], and on receiving due notification of the amount of such expenses, undertake to pay the same as directed by the Registrar of the Family Justice Courts.
- The following have been appointed as agents for the parties in connection with the execution of the above letter of request. Applicant's Agent: State name and firm. Respondent's Agent: State name and firm.

Party or Solicitor

[Name, address, email address and telephone number]

¹ To insert sub-case details if relevant.

106.

PDF UPLOAD

P.15, r.25(1), 28, 29, 30 FJ(G)R 2024

Form of Attestation

\Box Sworn \Box Affirmed by	
Enter full name as per NRIC/Passport here	e (name)
on this Enter date here (date)	
at Enter place here	_ (place)
\Box through the interpretation of \Box	
Enter name of interpreter here	(name)
in the following language:	
🗆 Mandarin 🗆 Malay 🗆 Tamil	
□ Others: Enter language here	
\Box having audibly read over the contents of	f the document to the deponent ²
\Box through the interpretation of	
Enter name of interpreter here	(name)
Enter nume of interpreter nere	
in the following language:	
in the following language:	1
in the following language: □ Mandarin □ Malay □ Tamil	1
in the following language: □ Mandarin □ Malay □ Tamil □ Others: Enter language here	1
in the following language: □ Mandarin □ Malay □ Tamil □ Others: Enter language here	1
in the following language: Mandarin Malay Tamil Others: Enter language here and the deponent seemed to understand	1
in the following language: Mandarin Malay Tamil Others: Enter language here and the deponent seemed to understand	1
in the following language: Mandarin Malay Tamil Others: Enter language here and the deponent seemed to understand	1
in the following language: Mandarin Malay Tamil Others: Enter language here and the deponent seemed to understand	1
in the following language: Mandarin Malay Tamil Others: Enter language here and the deponent seemed to understand in my presence.	1
in the following language: Mandarin Malay Tamil Others: Enter language here and the deponent seemed to understand in my presence.	1
in the following language: Mandarin Malay Tamil Others: Enter language here and the deponent seemed to understand in my presence. Before me,	1
in the following language: Mandarin Malay Tamil Others: Enter language here and the deponent seemed to understand in my presence.	1

 ¹ This option is used if you require interpretation.
 ² This option is used for illiterate or blind persons. If interpretation is also required, please select the interpretation option as well.

107.

PDF UPLOAD

P.15, r.25(2) FJ(G)R 2024

Form of Declaration

¹I, [Enter name here], confirm and declare that:

- (i) The matters stated in the \Box written complaint \Box statement are true and correct; and
- (ii) I understand that I commit an offence under section 199 of the Penal Code 1871 if I make, in the □ written complaint □ statement, any statement which is false, and which I know or believe to be false or do not believe to be true, touching any point material to the object for which the □ written complaint □ statement is made or used.

²I, [Enter name here], declare that:

- (i) I have verified the identity of the applicant; and
- (ii) I have read the matters stated in the \Box written complaint \Box statement over to the applicant in a language that the applicant understands, and the applicant has confirmed that those matters are true and correct.

Where applicable, the statement is to be sworn or affirmed in accordance with Form of Attestation (Form 106) of the Family Justice (General) Rules 2024³.

¹ Where declaration is made by the applicant.

² Where declaration is made on behalf of the applicant.

³ If the application is filed by an advocate and solicitor on the party's behalf in proceedings under Part 8 of the Women's Charter 1961.

108A.

E-FORM

P.15, r.35 FJ(G)R 2024, Para Z, 51(1), 53(2) PD 2024

Consent (General)

This Form is used to indicate your consent to the other party's **Originating Application**, **Summons** or for parties to **agree on other terms which are to be recorded as a consent order**. This Form may also be used to indicate your consent to the other party's **Appeal** or **application(s) in appeal** heard in the Family Justice Courts.

Do **<u>NOT</u>** use this Form if you are consenting to the following proceedings:

If y	you consent to:	Consent to be provided via:
1	Originating Application for <u>Simplified</u> Divorce or <u>Simplified</u> Judicial Separation	the Originating Application
2	Draft ancillary reliefs order (for ancillary matters in divorce, judicial separation, nullity or financial relief proceedings)	the Draft Ancillary Reliefs Order (Form 8)
3	Proceedings under Mental Capacity Act 2008 including summons or draft consent orders	Consent (Mental Capacity Act 2008) (Form 108B)
4	Originating Application for Adoption <u>AND</u> you are a party or a Relevant Person	Consent (Relevant Person)

You can use the same Section 1 for more than 1 person to indicate their consent if the **same options** apply to **all** persons. Otherwise, please use a separate Section 1 for each person who selects different options.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

<u>IMPORTANT</u>: Before signing this consent, you <u>**MUST**</u> read the entire document which you are consenting to carefully. You may also wish to consult an <u>independent</u> lawyer (not the other party's lawyer) to understand the legal effect of the document. Your signed consent will be submitted to the Court and may affect your legal rights and obligations.

Section 1: Consent

Use a separate Form for each case number.

State the sub-case number:

Enter sub-case number here.

If consent is given before the start of proceedings,

State the parties in the intended proceedings:

Applicant:	Enter full name as per NRIC/Passport here.
Respondent:	Enter full name as per NRIC/Passport here.

By signing this document, each person in clause 5 states as follows:

I understand the nature and effect of the orders sought in
 □ the Originating Application for (describe the subject matter here).

□ the Summons for (describe the subject matter here).

 \Box the agreed terms in <u>Section 2</u>.

Enter name of application/document here.

- I have read and understood the contents of
 □ the Originating Application and the supporting affidavit(s)
 □ the Summons and the supporting affidavit(s)
 - □ the Originating Application
 - \Box the Summons
 - \Box the agreed terms in <u>Section 2</u>.
 - Enter name of application/document here.

Notes

If you are consenting to the Originating Application, please state the OA case number only.

If you are consenting to an appeal, please state the appeal case number only.

If you are consenting to a Summons, please state the OA case number <u>and</u> subcase number.

If you are consenting to an application in an appeal, please state the appeal case number **and** sub-case number.

If consent is given before the start of Court proceedings, state the name of the parties in the proceedings as it would appear in the Court document title.

Include the amendment

number only if it is

applicable.

Question **3a** is only for Originating Application for Divorce / Judicial Separation / Nullity.

3a. □ I consent to the Applicant's Originating Application for □Divorce □ Judicial Separation □ Nullity (Amendment no. Enter no. here).
 Proceed to Question 4b.

Questions **3b** *and* **4a** *are <u>not applicable</u> for Originating Application for Divorce / Judicial Separation / Nullity.*

3b. I consent to the making of the orders sought in

the Originating Application (Amendment no. Enter no.
<u>here</u>).
the Summons (Amendment no. Enter no. here).
the agreed terms in Section 2.
Enter name of application/document here.

Questions 4a, 4b and 4c are optional.

Image: Section of the contrespondences to be sent to: Image: Section of the contrespondences to be sent to: Image: Image: Section of the contrespondences to be sent to: Image: Section of the contrespondences to be sent to: Image: Image: Image: Section of the contrespondences to be sent to: Image: Section of the contrespondences to be sent to: Image: Image: Image: Image: Section of the contrespondences to be sent to: Image: Section of the contrespondences to be sent to: Image: I			
□ Originating Application □ Summons □ Supporting affidavit □ Enter name of application/document here. □ All subsequent documents filed in these proceedings 4b. □ I consent for all Court documents filed in these proceedings to be served on me in this manner: □ through my lawyer. □ on me: Mode of service: Enter details here. Contact number / Address: Enter details here I can change these details by informing the other party. 4c. □ I consent for all Court correspondences to be sent to: □ my email address: Enter details here. □ my Singapore residential address: Enter details here. I can change these details by informing the Court and the	4a.	-	Select either 4a OR 4b.
□ Summons □ Supporting affidavit □ Enter name of application/document here. □ All subsequent documents filed in these proceedings 4b. □ I consent for all Court documents filed in these proceedings to be served on me in this manner: □ through my lawyer. □ on me: Mode of service: Enter details here. Contact number / Address: Enter details here. I can change these details by informing the other party. 4c. □ I consent for all Court correspondences to be sent to: □ my email address: Enter details here. □ my Singapore residential address: Enter details here. I can change these details by informing the Court and the			
 Supporting affidavit Enter name of application/document here. All subsequent documents filed in these proceedings 4b. □ I consent for all Court documents filed in these proceedings to be served on me in this manner: through my lawyer. on me: Mode of service: Enter details here. 4c. □ I consent for all Court correspondences to be sent to: my email address: Enter details here. I can change these details by informing the other party. 4c. □ I consent for all Court correspondences to be sent to: my email address: Enter details here. my Singapore residential address: Enter details here. I can change these details by informing the Court and the 			
 Letter name of application/document here. All subsequent documents filed in these proceedings 4b. I consent for all Court documents filed in these proceedings to be served on me in this manner: through my lawyer. on me: Mode of service: Enter details here. Contact number / Address: Enter details here. I can change these details by informing the other party. 4c. I consent for all Court correspondences to be sent to: my email address: Enter details here. I can change these details by informing the Court and the I can change these details by informing the Court and the 			
 All subsequent documents filed in these proceedings 4b. □ I consent for all Court documents filed in these proceedings to be served on me in this manner: □ through my lawyer. □ on me: Mode of service: Enter details here. Contact number / Address: Enter details here. 4c. □ I consent for all Court correspondences to be sent to: □ my email address: Enter details here. I can change these details by informing the other party. 4c. □ I consent for all Court correspondences to be sent to: □ my email address: Enter details here. □ I can change these details by informing the Court and the 		□ Supporting affidavit	
 4b. □ I consent for all Court documents filed in these proceedings to be served on me in this manner: □ through my lawyer. □ on me: Mode of service: Enter details here. Contact number / Address: Enter details here. I can change these details by informing the other party. 4c. □ I consent for all Court correspondences to be sent to: □ my email address: Enter details here. □ my Singapore residential address: Enter details here. □ my Singapore residential address: □ my Singapore residential address: □ f you wish to my Singapore residential address: □ There details here. □ There details here here. □ There details here here here here here here here her		□ Enter name of application/document here.	
 a reconsent for all count documents fried in these proceedings to be served on me in this manner: a through my lawyer. b on me: c on me: Mode of service: Enter details here. Contact number / Address: Enter details here. I can change these details by informing the other party. 4c. a I consent for all Court correspondences to be sent to: a my email address: Enter details here. a my Singapore residential address: Enter details here. I can change these details by informing the Court and the 		\Box All subsequent documents filed in these proceedings	
 to be served on me in this manner: through my lawyer. on me: Mode of service: Enter details here. Contact number / Address: Enter details here. I can change these details by informing the other party. 4c. I consent for all Court correspondences to be sent to: my email address: Enter details here. I my singapore residential address: Enter details here. I can change these details by informing the Court and the 	4b.	□ I consent for all Court documents filed in these proceedings	
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Contact number / Address: Enter details here. I can change these details by informing the other party. 4c. I consent for all Court correspondences to be sent to: my email address: Enter details here. my Singapore residential address: Enter details here. I can change these details by informing the Court and the Question 4c is applicable only to unrepresented parties. If you wish to receive Court notices at an address which is different from clause 5, select 4c.		\Box on me:	
Enter details here. I can change these details by informing the other party. 4c. I consent for all Court correspondences to be sent to: my email address: Enter details here. Question 4c is applicable only to unrepresented parties. If you wish to receive Court notices at an address which is different from clause 5, select 4c. I can change these details by informing the Court and the P.O. Boxes are not acceptable.		Mode of service: Enter details here.	
 4c. □ I consent for all Court correspondences to be sent to: □ my email address: Enter details here. □ my Singapore residential address: Enter details here. I can change these details by informing the Court and the 		Contact number / Address:	
 4c. □ I consent for all Court correspondences to be sent to: □ my email address: Enter details here. □ my Singapore residential address: Enter details here. I can change these details by informing the Court and the acceptable. 		Enter details here.	
 4c. □ I consent for all Court correspondences to be sent to: □ my email address: Enter details here. □ my Singapore residential address: Enter details here. I can change these details by informing the Court and the acceptable. 			
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□ If consent for all court correspondences to be sent to. □ only to unrepresented parties. If you wish to receive Court notices at an address which is different from clause 5, select 4c. □ If consent for all court correspondences to be sent to. □ only to unrepresented parties. If you wish to receive Court notices at an address which is different from clause 5, select 4c. □ If consent for all court events of the court and the level □ only to unrepresented parties. If you wish to receive Court notices at an address which is different from clause 5, select 4c. □ If consent for all court events of the court and the level □ only to unrepresented parties. If you wish to receive Court notices at an address which is different from clause 5, select 4c.			
 ☐ my email address: Enter details here. ☐ my Singapore residential address: Enter details here. ☐ can change these details by informing the Court and the 	4c.	\Box I consent for all Court correspondences to be sent to:	Question 4c is applicable
 ☐ my Singapore residential address: Enter details here. I can change these details by informing the Court and the 		□ my email address: Enter details here.	v A
Enter details here.address which is different from clause 5, select 4c.I can change these details by informing the Court and theacceptable.		□ my Singapore residential address:	receive Court notices at an
I can change these details by informing the Court and the <i>P.O. Boxes are not acceptable.</i>			address which is different
			P.O. Boxes are not

Name	NRIC/FIN/Passport number	Singapore address or email address	Partytypeinproceedings(e.g. Respondent/Co-Respondent/Named Person)(e.g. Respondent)
Enter full name as per NRIC/Passport here.	Enter NRIC/ FIN/ Passport no. here.	Enter Singapore address or email address here.	Enter party type or relationship here.
Enter full name as per NRIC/Passport here.	Enter NRIC/ FIN/ Passport no. here.	Enter Singapore address or email address here.	Enter party type or relationship here.
Enter full name as per NRIC/Passport here.	Enter NRIC/ FIN/ Passport no. here.	Enter Singapore address or email address here,	Enter party type or relationship here.

Please note that each person listed here, or his/her lawyer (if any), is to provide his/her signature below.

- To be completed if you are acting in-person
- Please select this option if □ I acknowledge that I have considered this application and have you are <u>not</u> represented by been informed by the other party's lawyer of my right to seek a lawyer and the other independent legal advice. party is represented by a lawyer. If you are **not** represented Signed by Enter full name as per NRIC/Passport here. by a lawyer, you are required to sign this form before a Commissioner for Oaths in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024. To be completed by lawyer (if any) *If you are represented by a* lawyer, you are not required to sign this form. Instead, your lawyer may sign this form on your behalf. Signature of Counsel for the If this is completed by your Enter party type or relationship to Infant here. lawyer, your lawyer should update your records in eLitigation to Enter name of law firm and lawyer's name here. ensure that he/she is the

Date: Enter date here. lawver on record.

Otherwise, the Court may

require you to sign this document personally.

[Add another Section 1 if required]

Section 2: Agreed Terms

The terms of the agreement between the parties which are to be recorded as a Court order are set out below:

1.	Enter details here.
2.	Enter details here.
3.	Enter details here.
4.	Enter details here.
5.	Enter details here.

108B.

P.15, r.35 FJ(G)R Para 51(1) PD Para 53(2) PD

Consent (Mental Capacity Act 2008)

This Form is to be used to indicate your consent to the other party's **Originating Application** or **Summons for proceedings under the Mental Capacity Act 2008**.

You can use the same Section 1 for more than 1 person to indicate their consent if the **same options** apply to **all** persons. Otherwise, please use a separate Section 1 for each person who selects different options.

ONLY for SIMPLIFIED proceedings under Mental Capacity Act 2008

If you wish to consent to the proceedings, you may do so in the following ways: <u>Option 1</u>: Sign the online form in iFAMS. You <u>do not</u> need to sign before a Commissioner for Oaths.

Option 2: Sign this form in hard copy before a Commissioner for Oaths.

Option 1

You are eligible to use <u>Option 1</u> if the Applicant entered your NRIC /FIN No. into iFAMS. In certain cases, you may be sent an email notification if the Applicant has your email address.

To check your eligibility to use <u>Option 1</u>, log-in to <u>https://ifams.gov.sg/</u> with your Singpass and follow the steps.

IMPORTANT: Before signing this consent, you **MUST** read the entire Originating Application or Summons carefully. You may also wish to consult an **independent** lawyer (not the other party's lawyer) to understand the legal effect of the document. Your signed consent will be submitted to the Court and may affect your legal rights and obligations.

Section 1: Consent

Sect	10n 1: Con	sent		Notes
Sta	te the main ca	se number:	Enter main case number here.	If you are consenting to the
Sta	te the sub-case	e number:	Enter sub-case number here.	Originating Application, please state the OA case number only.
If co	onsent is given	before the st	art of proceedings,	If you are consenting to a
Sta	te the parties i	n the intend	ed proceedings:	Summons, please state the OA case number <u>and</u> sub-
App	plicant:	Enter full na	ame as per NRIC/Passport here.	case number.
Res	pondent:	Enter full na	ame as per NRIC/Passport here.	If consent is given before the start of Court proceedings,
Pati	ent:	Enter full na	ame as per NRIC/Passport here.	state the name of the parties in the proceedings as it
Rv o	signing this de	cument eq	ch person in clause 5 states as	appears in the Court document title.
follo		cument, ca	en person in clause 5 states as	
I				Provide the name of the Patient.
1.			l effect of the orders sought in	
	\Box the Origina	• • •	eputy under the Mental Capacity	
	Act 200		cputy under the Mental Capacity	
			n [Enter section number] of the	×
		Capacity Act		
		on, setting as	ntal Capacity Act 2008 (variation, ide).	
			ribe the subject matter here].	
	\Box the agreed	terms in <u>Sect</u>	tion <u>2</u> .	
	Enter name	e of application	on/document here.	
2.	I have read an	d understood	l the contents of	
2.			tion and the supporting	
	affidavit(s)			
			apporting affidavit(s).	
	\Box the agreed			
	Enter nam	e of applicati	on/document here.	
3.	I consent to th	e making of	the orders sought in	Include the amendment
	\Box the Origina <u>here]</u>).	ting Applica	tion (Amendment no. <u>[Enter no.</u>	number only if it is applicable.
		ons (Amendr	nent no. [Enter no. here]).	
	\Box the agreed	terms in <u>Sect</u>	<u>tion 2</u> .	
	Enter name	e of application	on/document here.	
4.	I consent to the	he dispensati	on of service of the above Court	

I consent to the dispensation of service of the above Court documents in paragraph 2 and all other and subsequent documents filed in these proceedings on me. 4.

5. Person(s) signin	g this consent:		
Name	NRIC/ FIN/ Passport number	Address	Partytypeinproceedings(e.g. Respondent)ORRelationship to Patient
Enter full name as per NRIC/Passport here.		Enter address here.	Enter party type or relationship here.
Enter full name as per NRIC/Passport here.		Enter address here.	Enter party type or relationship here.
Enter full name as per NRIC/Passport here.	Enter NRIC/ FIN/ Passport no. here.	Enter address here.	Enter party type or relationship here.

Please note that each person listed here, or his/her lawyer (if any), is to provide his/her signature below.

To be completed if you are acting in-person

□ I acknowledge that I have considered this application and have been informed by the other party's lawyer of my right to seek independent legal advice.

Signed by Enter full name as per NRIC/Passport here.

Please select this option if you are *not* represented by a lawyer and the other party is represented by a lawyer.

If you are not represented by a lawyer, you are required to sign this form before a Commissioner for Oaths.

Х

Signature of

On this Enter date here (date) (place) At Enter place here

 \Box through the interpretation of

Enter name of interpreter here

in the following language:

(name)

 \Box Mandarin \Box Malay \Box Tamil

□ Others: Enter language here

This option is used if you require interpretation.

If you require an option for illiterate or blind persons, refer to Form 54 for the full range of options.

Before me,

Commissioner for Oaths

To be completed by lawyer (if any)

Х

Signature of

Counsel for the Enter party type or relationship to Patient here.

Enter name of law firm and lawyer's name here.

Date: Enter date here.

[Add another Section 1 if required]

Section 2: Agreed Terms

The terms of the agreement between the parties which are to be recorded as a Court order are set out below:

1.	Enter details here.
2.	Enter details here.
3.	Enter details here.
4.	Enter details here.
5.	Enter details here.

If you are represented by a lawyer, you are not required to sign this form. Instead, your lawyer may sign this form on your behalf.

If this is completed by your lawyer, your lawyer should update your records in eLitigation to ensure that he is the lawyer on record. Otherwise, the Court may require you to sign this document personally.

109.

PDF UPLOAD

P.15, r.5 FJ(G)R 2024 Para 108(x1) PD 2024

Request for Production of Documents Filed in Court or Court's Records

To: The Registrar Family Justice Courts 3 Havelock Square Singapore 059725

Section 1: Request Details

Request by:	□ Law Firm □ Individual	
Name of requestor / law firm for requestor:	Enter name of requestor/law firm here	
Name of requestor's counsel in charge of matter:	Enter name of counsel here	
Address:	Enter address here	
E-mail address:	Enter e-mail address here	
Telephone and mobile numbers:	Enter number(s) here	
Case number:	Enter case number here	
Names of Parties:	Enter names of parties here	
Dates of hearing	From [Select date here] to [Select date here]	

Section 2: Documents

Please specify the document(s) filed in court or Court's records that is/are required for the hearing:

Enter details here.

Section 3: Brief Reasons

Please state the brief reasons why the document(s)/records mentioned in Section 2 above is/are required for the hearing:

Enter details here.

Section 4: Alternative Means

Please state whether there are any alternative means by which the document(s)/records mentioned in Section 2 above can be obtained by the requestor:

Enter details here.

 \Box We \Box I undertake to pay any applicable fee prescribed by the Family Justice (General) Rules 2024 immediately upon approval of the request.

Requestor / Requestor's Counsel in charge of matter

PDF UPLOAD

Para 159(13)(b)(ii) PD 2024

Affidavit to exercise the Registrar's Empowerment Clause

This Form is used to provide evidence in support of your request for the Registrar to sign certain documents. This Affidavit is only required for Court orders that require one party to notify the other party to sign the documents ("notice requirements"), otherwise described as "Category B orders" in the Family Justice Courts Practice Directions¹. This Affidavit must be filed before the Registrar signs any documents². This affidavit is not required for Court orders with no notice requirements, known as "Category A orders"³.

Before completing this Form, ensure that your case satisfies the following conditions:

A. The Court order

- (a) There is a Registrar's Empowerment Clause ("REC"). RECs are orders which may be granted after the Court deals with ancillary matters or variation of orders. These orders empower the Registrar to sign documents to effect the sale and transfer of matrimonial assets.
- (b) The timeframe relating to the relevant transaction for which Registrar's signature is required has not lapsed.

B. The documents to be signed by the Registrar

The Registrar will not sign the documents which contain:

- (a) declarations on matters which are not within the knowledge of the Registrar
- (b) statements which bind the party to obligations beyond the actual surrender, sale or transfer.

Examples of such documents are declarations, undertakings, documents relating to loan approvals or payment of levy.

This form is only for use in eLitigation.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

The Form for completion is from the next page onwards. This cover note need not be included in the filed affidavit.

¹ See Para $\frac{159(11)}{100}$ of the FJC Practice Directions.

² See Para 159(13)(b) of the FJC Practice Directions.

³ See Para 159(11) of the FJC Practice Directions.

[Enter party type here]: [Enter name of maker here]: [Enter ordinal number of affidavit (in relation to previous affidavits filed by the same party) here]: [Enter date of affidavit filed here]: [Enter hearing type and summons no. (if applicable) here]⁴

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]⁵

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

AFFIDAVIT

Section 1: Introduction

Name of maker:	Enter full name as per NRIC/ Passport here.
Identity No.:	Enter NRIC/ FIN/ Passport no. here.
Address:	Enter address here.
Occupation:	Enter occupation here.

- 1a. I am the Applicant Respondent in <u>enter main case number here</u>.⁶
- 1b. This affidavit is in support of my request for the Registrar to sign documents to effect the sale / transfer / surrender / state other transaction(s) of the property at (address) / details of asset⁷.
- 1c. I confirm that I have a valid Court order dated enter date here.⁸
- 1d. Where the facts in this affidavit are within my personal knowledge, they are true. Where they are not within my personal knowledge, they are true to the best of my knowledge, information and belief.

⁴ Refer to paragraph 109(x4) of the Family Justice Practice Directions 2024 if required.

⁵ To insert sub-case details if relevant.

⁶ You may refer to the Originating Application for your party type. Please state the OA case number i.e. FC/OAD 1/2022 and not the sub-case number.

⁷ Enter the details based on your Court Order.

⁸ Remember to check the validity of your Court order before you request to see the duty Judge; he/she will not accept an order in which the timeframe for sale/transfer has lapsed. For example, if the order states that the sale/transfer of the property is to take place within 6 months of the Final Judgment ("FJ") but more than 6 months have passed, the Court order is no longer considered valid. In such case, a separate application must be filed to extend the timeframe for the sale/transfer (an oral request is not allowed).

Section 2: Statement⁹

I set out the reasons for my summons / application:

- 2. I refer to the Order of Court dated <u>enter date here</u>.
- 3. In the said Order of Court, it was ordered that the matrimonial property at <u>enter address</u> <u>here</u> shall be <u>state the contents of the Order of Court in relation to the matrimonial</u> <u>property</u>.
- 4. The Court also made orders for the Registrar or Assistant Registrar of the Family Justice Courts to be empowered to sign the documents relating to the <u>[select an option]</u>¹⁰ of the property (the "Documents") in the event that <u>[select a party type]</u>¹¹ fails to execute the same upon being given <u>[enter 7, 14 or other specified time]</u> days' written notice.
- 5. Under the Order of Court, the <u>[select an option]</u>⁸ is to take place within <u>state the period</u> <u>specified in the Order of Court e.g. 3 months/6 months/other specified time period</u> from the date of the Order of Court. The time period prescribed in paragraph <u>state</u> <u>paragraph number in the Order of Court</u> of the Order of Court has not been exceeded as at the date of signing this affidavit.
- 6. The said Order of Court (select the applicable option):
 - a) \Box states that both parties are to have joint conduct of the sale
 - b) states that <u>enter party type or name here</u> is to have sole conduct of the sale
 - c) \Box is silent on who has conduct of the sale.
- 7. The Order of Court has been served on the □ Applicant □ Respondent (the "defaulting party") on <u>enter date here</u> by [manner or service / explain how the defaulting party is aware of the Order of Court].
- 8. I have made attempts to obtain the defaulting party's execution of the following Documents [state the name of the sale/transfer document(s) e.g. Option to Purchase / Sale and Purchase Agreement / Transfer].

⁹ For easy reference,

⁽a) Each paragraph in your statement is to be numbered consecutively.

⁽b) Dates, sums and other numbers must be expressed in figures and not in words.

⁽c) Facts should be set out clearly and chronologically or in some other logical sequence.

If you have any exhibits or supporting documents, you may include them in Section 5.

¹⁰ The options are: sale / transfer / surrender.

¹¹ The options are: either party / the Applicant / the Respondent.

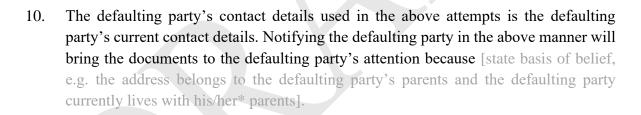
9. The particulars of my attempts are as follows:-

PARTICULARS

Set out in numbered paragraphs the number of attempts – e.g.

<u>Attempt 1</u>

On [date], I sent a letter to the defaulting party at [address], reminding him/her* to go down to [place] to sign and execute the Sale/Transfer* Documents. A copy of the letter is attached herewith as exhibit "A".]



- 11. In response to the above attempts, the defaulting party [failed to respond in any way] / [responded in the following manner:].
- 12. Despite these attempts, the defaulting party has failed to sign and execute the Documents.
- 13. I have complied with paragraph <u>state paragraph number in the Order of Court</u> of the Order of Court and given the requisite <u>[enter 7, 14 or other specified time]</u> days' written notice to the defaulting party.
- 14. <u>I declare</u> that as at the date of signing of this affidavit, I am unaware of any pending application(s) affecting the Order of Court, such as
 - (a) an appeal
 - (b) an application to stay the execution
 - (c) an application for variation and/or setting aside.

15. I am aware that <u>I must make full and frank disclosure of all relevant facts</u> which may directly or indirectly affect the Registrar's decision to exercise his/her powers to sign the Documents on behalf of the defaulting party.

Section 3: Summary of Claim

16. I am asking that the Registrar to exercise his/her powers pursuant to the Order of Court dated <u>enter date here</u> to sign the □ Sale □ Transfer Documents as the □ Applicant □ Respondent has defaulted in signing the same.

Section 4: Affirmation

This affidavit is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

Section 5: Exhibit Content Page

Please refer to the Generic Affidavit (Form 54) for the exhibit content and cover pages to be included in your affidavit (where applicable).

111.

E-FORM

P.16, r.1, r.2 FJ(G)R 2024

Notice of Withdrawal / Discontinuance

This Form is used to discontinue the proceedings or withdraw any particular claim.

For use only in:

- (a) Originating Applications;
- (b) Summonses in Originating Applications; or
- (c) applications filed in iFAMS.

Not for use in:

- (d) Appeals; and
- (e) Applications in appeals.

This form contains Notes to help you in the completion of the form. Please note that the Notes are <u>NOT</u> to be construed or regarded as a substitute for legal advice. Please seek legal advice if necessary.

Section 1: Notice

If you are filing this form in iFAMS, only the parts in blue boxes are applicable to you.

			<u>Notes</u>
Stat	e the main case number: Enter	er case number here.	You may refer to the Originating Application for your party type.
1.	\Box the Applicant		Please state the OA case
	\Box the Respondent		number i.e. FC/OAD
	Enter full name or party	type here.	1/2022 and not the sub- case number.
2.	I wish to give notice of my in	tention to:	
2a.			
	\Box Reply in	Enter case number here.	applicable <u>only</u> if your case is filed in eLitigation.
	□ [State document] in	Enter case number here.	
2b.	2b. □ discontinue the following legal proceedings: □ Originating Application Enter case number here.		
		Enter case number here.	
	Enter case number here.		

2c.	□ withdraw the Application in Enter case number here.	Option 2c is applicable only if your case is filed in iFAMS and you wish to withdraw an Application. To discontinue the MSS, SS, VAP or VAM main case which is filed in iFAMS, you need to attend at the next hearing to inform the Court.
2d.	The withdrawal / discontinuance is against the Applicant the Respondent the Co-Respondent Enter full name or party type here.	You may select more than one person / party. For cases filed in eLitigation, other than cases with OAD prefix, you must additionally file a Request to Remove a Party from an action.
3.	 Have you served the document(s) / proceeding(s) in question 2 on the other party? No. Proceed to sign below. Yes. Proceed to sign and obtain the signature of the party giving consent to this Notice below. 	If the document(s) / proceeding(s) in question 2 have been served on the other party, you are to obtain the other party's consent before filing this Notice.
Sign	ature of party giving Notice or counsel for that party	
	X Signature Enter party type here. Counsel for the Enter party type here. Enter name of law firm and lawyer here. Date Enter date here. :	
Sign	ature of party giving consent or counsel for that party	
	I consent to this Notice	

Х		
Sigr	nature	
	Enter party type here.	
	Counsel for the Enter party type l	nere.
	Enter name of law firm and lawyer	here.
Dat	e: Enter date here.	

112.

PDF UPLOAD

P.17, r.1 FJ(G)R 2024

Notice of Payment Into Court

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹ Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

NOTICE OF PAYMENT INTO COURT

To: The Registrar, the applicant and the other respondents

Take notice that —

1. The respondent [Enter name here] has paid \$[Enter sum here] into Court.

Select the applicable option.

2. □ The said \$[Enter sum here] is in satisfaction of □ the cause of action □ all the causes of action in respect of which the applicant claims (and after taking into account and satisfying the abovenamed respondent's cause of action for [State cause of action] (in respect of which he or she counterclaims).

□ The said \$[Enter sum here] is in satisfaction of the following causes of action in respect of which the applicant claims, namely, [State cause of action] (and after taking into account as above).

□ Of the said \$[Enter sum here], \$[Enter sum here] is in satisfaction of the applicant's cause(s) of action for [State cause of action] (and after taking into account as above) and \$[Enter sum here] is in satisfaction of the applicant's cause(s) of action for [State cause of action] (and after taking into account as above).

Solicitor for the respondent

[Name, address, email address and telephone number of solicitor]

¹ To insert sub-case details if relevant.

113.

P.17, r.1 FJ(G)R 2024

PDF UPLOAD

Notice of Acceptance of Money Paid Into Court

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

NOTICE OF ACCEPTANCE OF MONEY PAID INTO COURT

To: The Registrar and the respondent

Take notice that the applicant accepts the sum of **\$**[Enter sum here] paid in by the respondent [Enter name here] in satisfaction of the cause(s) of action in respect of which it was paid in and in respect of which the applicant claims against that respondent (and abandons the other causes of action in respect of which he or she claims in this action).

Solicitor for the applicant

[Name, address, email address and telephone number of solicitor]

¹ To insert sub-case details if relevant.

114.

E-FORM

P.18, r.3 FJ(G)R 2024

Generic Order of Court

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

(Title as in action)

ORDER OF COURT [pursuant to section (no.) of (title of Act)]¹

In the matter of [name] (ID no.), a person alleged to lack capacity "P"²

Date of order:	Enter date here.
Hearing Judge:	Select the applicable option ³ Enter name of judicial officer here.
Parties present:	 Applicant Applicant's counsel Respondent Respondent's counsel Others. Enter party type/details here. Hearing on paper. No parties are present.⁴ Without notice.⁵
Venue:	 □ Family Justice Courts □ Supreme Court □ Open court □ Chambers Enter court / chamber no. here.
Case no. (including Summons no.) and type of hearing:	Enter case / summons no. and type of hearing here.

¹ If this Court order contains *final* orders, the title of the Court order should follow the title of the Originating Application (including any references to the applicable legislation).

For all orders made in Mental Capacity Act 2008 proceedings, the title should read Order of Court pursuant to section [no.] of the Mental Capacity Act 2008.

² To be included in <u>all</u> orders made in Mental Capacity Act 2008 proceedings.

³ The applicable options are: Assistant Registrar / Judge / Judicial Commissioner / District Judge / Deputy Registrar / Magistrate / Registrar / Others.

⁴ Applicable if the Court dealt with the summons / application without an oral hearing.

⁵ Applicable only if the summons / application is without notice, i.e. there is no responding party / Respondent.

Orders made:

\Box By consent,

- 1. State the orders made.
- 2. State the orders made.
- **3.** State the orders made.

\Box And further ordered,

- 4. State the orders made.
- 5. State the orders made.
- **6.** State the orders made.

Notes:

- 1. The person or entity served with this judgment/order and who/which has been ordered to pay money, to do or not to do any act must comply immediately or within the time specified in the judgment/order, if any.
- 2. Failure to comply may result in enforcement of judgment/order proceedings, including contempt of Court proceedings, against the said person or entity.

Para 158(4), (6) PD 2024

Order of Court to Prevent Removal of Child Out of Jurisdiction Return of Child to Custody of Lawful Guardian / Parent

Please use this Form with the Generic Order of Court (Form 114).

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

The Court made the following orders¹:

- The child(ren) [name(s) of child(ren)] ([Birth Certificate / NRIC / Passport No. of child(ren)]) shall be returned to the custody of his/her/their lawful
 guardian
 parent [name(s) of guardian/parent] ([NRIC / FIN / Passport No. of guardian/parent]).
- 2. The □ Applicant □ Respondent shall hand over to the □ Applicant □ Respondent forthwith, the child(ren)'s unexpired passport(s) of any country, visas, and other travel documents pending the outcome or further orders made on this application and/or these proceedings.
- 3. [Pending the outcome or further orders made on this application and/or these proceedings,]² the □ Applicant □ Respondent, shall not by □ himself/herself □ his/her servants or agents bring the child(ren) [name(s) of child(ren)] ([Birth Certificate / NRIC / Passport No. of child(ren)]) out of Singapore without the prior written consent of the □ Applicant □ Respondent or an order of court.³*
- 4. The \Box Applicant \Box Respondent must give to the Court the undertakings in the manner set out in <u>Schedule 1</u> to this Order.
- 5. [Enter any other reliefs claimed here.]

Only if a Bailiff is to enforce the Order⁴ (Applicable only if the order is for return of child(ren))

6. For the purposes of enforcing this Order, the Bailiff be hereby directed to seize the person(s) of the child(ren) [name(s) of child(ren)] ([Birth Certificate / NRIC / Passport No.

¹ Select the applicable orders.

² The parts in brackets are applicable if this is an interim order of court

³ For service of the order on the Immigration and Checkpoint Authority, please refer to the Family Justice Courts Practice Directions 2024.

⁴ The orders in this Section is only applicable if the Court orders a Bailiff to enforce the order.

<u>of child(ren)]</u>) at the place of enforcement at <u>[state specific address of enforcement]</u> and the child(ren) be delivered into the custody of is/her/their lawful \Box guardian \Box parent <u>[name(s) of guardian/parent]</u> (<u>[NRIC / FIN / Passport No. of guardian/parent]</u>).

- (a) The □ Applicant □ Respondent shall accompany the Bailiff to the place of enforcement to identify the child(ren) <u>[name(s) of child(ren)]</u> (<u>[Birth Certificate / NRIC / Passport No.</u> <u>of child(ren)]</u>).
 - (b) The Bailiff shall also be accompanied by the following persons to the place of enforcement:
 - (i) the \Box Applicant \Box Respondent;
 - (ii) the \Box Applicant's Counsel \Box Respondent's Counsel;
 - (iii) an auxiliary police officer engaged by the □ Applicant □ Respondent at the □ Applicant's □ Respondent's cost, subject to the condition that where the person against whom the enforcement is to be carried out or the child / any of the children concerned is a female, the auxiliary police officer to be engaged shall be a female officer.
 - (c) As far as is practicable, the child(ren) shall be handed over to the □ Applicant □ Respondent at the place of enforcement.
 - (d) The □ Applicant □ Respondent or the □ Applicant's Counsel □ Respondent's Counsel shall pay to the Court prior to the enforcement of this Order a deposit of S\$300 by cheque made payable to "Registrar, Supreme Court/AG"
 - (e) The Bailiff shall have the absolute discretion to do any or all of the following without having to give any reasons:
 - (i) take all necessary measures to ensure the personal safety of all persons (including the child(ren) or the Bailiff) involved in the enforcement;
 - (ii) postpone the enforcement or any part thereof.
 - (f) Nothing in this Order shall be construed to empower the Bailiff to effect entry into any building or break open any outer or inner door or window of the building or any receptacle therein.
- 8. The \Box Applicant's Counsel \Box Respondent's Counsel must give to the Court the undertakings in the manner set out in <u>Schedule 2</u> to this Order.⁵

⁵ Applicable only if the applying party is represented.

[Insert penal notice set out in the Generic Order of Court (Form 114) if applicable]

Schedule 1

<u>Undertakings provided by the Applicant Respondent to the Court</u>

I, [Name of party providing the undertaking] (<u>[NRIC / FIN/ Passport No.]</u>)., of [Enter address here], do hereby undertake to the
Court
Applicant
Respondent as follows:

- If the Court later finds that the Order dated [date of court order] ("this Order") or the carrying out of this Order has caused loss to the □ Applicant □ Respondent, and decides that the □ Applicant □ Respondent should be compensated for that loss, I shall comply with any order that the Court may make.
- 2. I shall, in respect of the any order the Court may make pursuant to paragraph (1) above:

(a) on or before [date] provide to the □ Applicant □ Respondent security in the sum of \$[Enter amount here] by causing

 \Box payment to be made in Court

 \Box a bond to be issed by an insurance company with a place of business within Singapore

 \square a written guarantee to be issued from a bank with a place of business within Singapore

 \Box payment to the \Box Applicant's \Box Respondent's solicitor to be held by the solicitor as an officer of the Court pending further order

and

- (b) cause evidence of the provision of security to be extended to the \Box Applicant \Box Respondent immediately after the security has been put up.
- 3. I shall pay the reasonable costs of anyone other than the □ Applicant □ Respondent which have been incurred as a result of this order and if the Court later finds that this order has caused such person loss, and decides that such person should be compensated for that loss, I shall comply with any order the Court may make.
- 4. At the same time this Order is served on the □ Applicant □ Respondent, I will serve on the □ Applicant □ Respondent a copy of the application, supporting affidavits and exhibits containing the evidence relied on by the □ Applicant □ Respondent. If the application and supporting affidavits have not been filed, I shall serve the same within 1 working day from the filing of the application and supporting affidavits.
- 5. I/My solicitor will give a copy of this order to anyone notified of this order.

6. If this order ceases to have effect, I will immediately take all reasonable steps to inform in writing anyone to whom I have given notice of this order, or who I have reasonable grounds for supposing may act upon this order, that it has ceased to have effect.

Only if a Bailiff is to enforce the Order⁶

(Applicable only if the order is for return of child(ren) and this is an undertaking to the <u>Court</u>)

- 7. I shall indemnify the Family Justice Courts and the Bailiffs and keep them indemnified at all times against
 - (a) all claims and payments for which the Family Justice Courts or the Bailiffs may, in the course of executing this Order, be rendered legally liable, and
 - (b) all actions, suits, proceedings, claims, demands, costs and expenses whatsoever which may be taken or made against the Family Justice Courts or the Bailiffs or incurred or become payable by the Family Justice Courts or the Bailiffs in the course of executing this Order.
- 8. I shall pay the costs, expenses and charges which may have to be incurred by the Court and/or the Bailiffs in connection with this Order, including the enforcement thereof.
- 9. As and when required by the Court or the Bailiffs, I shall provide sufficient funds to the Court or the Bailiffs to meet the costs, expenses and charges which may have to be incurred by the Court and/or the Bailiffs in connection with this Order, including the enforcement thereof.

Signature

I understand that if I should fail to carry out my undertaking, I am liable to be punished for non-compliance with this Order.

[Name of party providing the undertaking] **Date:** Enter date here

⁶ The undertakings in this Section is only applicable if the Court orders a Bailiff to enforce the order.

Schedule 2

Undertakings provided by the Applicant's Counsel Respondent's Counsel

Only if a Bailiff is to enforce the Order⁷ (Applicable only if the order is for return of child(ren))

I, [Name of counsel providing the undertaking], of [Name of law firm], do hereby undertake to the Court as follows:

- 1. I shall personally ensure that the the Order dated [date of court order] ("this Order") is executed in a calm and orderly manner respectful of the circumstances of the case.
- 2. I shall pay the costs, expenses and charges which may have been incurred by the Court and/or the Bailiffs in connection with this Order, including the enforcement thereof, if such costs, expenses and charges are not fully paid by the □ Applicant □ Respondent.
- 3. As and when required by the Court or the Bailiffs, I shall provide sufficient funds to the Court or the Bailiffs to meet the costs, expenses and charges which may have to be incurred by the Court and/or the Bailiffs in connection with this Order, including the enforcement thereof.

Signature

[Name of counsel providing the undertaking] Date: Enter date here

⁷ The undertakings in this Section is only applicable if the Court orders a Bailiff to enforce the order.

Notice to Applicant Respondent Non-party who has been served

To the applying party who is granted the Order of Court: This Notice is to be included in the Order of Court and served on the affected persons/parties. Note that this Notice is NOT a substitute for the penal notice set out in the Order of Court.

THIS DOCUMENT REQUIRES YOUR IMMEDIATE ATTENTION

You may wish to seek legal advice upon receiving this document.

Select the applicable order made.

- □ This Order requires you to return the child(ren) to the custody of the lawful □ guardian
 □ parent.
 - □ This Order prevents you from leaving Singapore with the child(ren) without the permission of the Court.
- 2. You should read all the terms of this Order very carefully. You are advised to consult a counsel as soon as possible. You have a right to apply to the Court to vary or discharge this Order.
- 3. If you disobey this Order, you will be guilty of contempt of Court and may be sent to prison or fined.

Effect of this Order

4. If you are required under this Order not to do something, you must not do it yourself or in any other way. You must not do it through others acting on your behalf or on your instructions or with your encouragement.

Third Parties

5. It is a contempt of Court for any person notified of this Order to knowingly assist in or permit a breach of the Order. Any person doing so may be sent to prison or fined.

Duration of this Order

6. This Order will remain in force until the trial or further order made by the Court.

Variation or discharge of this Order

7. The □ Applicant □ Respondent (or anyone notified of this order) may apply to the Court at any time to vary or discharge this Order (or so much of it as affects that person), but anyone wishing to do so must inform the □ Applicant's Counsel □ Respondent's Counsel.

E-FORM

Para 158(6) PD

Order for Seizure (Infant)

116A.

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

(Title as in action)

ORDER FOR SEIZURE (INFANT)

Enter date here.
Select the applicable option ¹ Enter name of judicial officer here.
□ Applicant □ Applicant's counsel
□ Respondent □ Respondent's counsel
□ Others. Enter party type/details here.
\Box Hearing on paper. No parties are present. ²
\Box Without notice. ³
□ Family Justice Courts □ Supreme Court
□ Open court □ Chambers Enter court / chamber no. here.
Enter case / summons no. and type of hearing here.

To the Bailiff

Whereas by an Order of this Court pronounced this day, it was ordered that the infant [Enter name and ID no. here] be returned to the custody of his/her lawful guardian, [Enter name and ID no. here]

You are directed to seize the person of the infant [Enter name and ID no. here] and the infant be delivered into the custody of his/her lawful guardian.

Date: Enter date here

¹ The applicable options are: Assistant Registrar / Judge / Judicial Commissioner / District Judge / Deputy Registrar / Magistrate / Registrar / Others.

² Applicable if the Court dealt with the summons / application without an oral hearing.

³ Applicable only if the summons / application is without notice, i.e. there is no responding party / Respondent.

Notes:

- 3. The person or entity served with this judgment/order and who/which has been ordered to pay money, to do or not to do any act must comply immediately or within the time specified in the judgment/order, if any.
- 4. Failure to comply may result in enforcement of judgment/order proceedings, including contempt of Court proceedings, against the said person or entity.

116B.

PDF UPLOAD

Para 158(6) PD 2024

Request for Attendance of the Bailiff (Seizure of Infant)

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹ Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

REQUEST FOR ATTENDANCE OF THE BAILIFF (SEIZURE OF INFANT)

- A. Requesting party:
 Applicant
 Respondent
- B. Address for the Bailiff's attendance: Enter address here
- C. Desired date and time of attendance: Enter date here / Enter time here
- D. Name of Infant: Enter name here

Request that the Bailiff do attend at the Address to seize the person of the Infant and the Infant be returned to the custody of his/her lawful guardian.

Name of person subject to the Order for seizure: Enter name of Applicant / Respondent / Other person here

Attached is a copy of the Order of Court duly sealed.

UNDERTAKING AND DECLARATION

1. I/We undertake to pay the fees prescribed by Part 3 of the Fourth Schedule of the Family Justice (General) Rules 2024.

¹ To insert sub-case details if relevant.

- 2. I/We hereby declare that as at the date of this Request, the person of the Infant Enter name here is not subject to any other enforcement or order issued by the Family Justice Courts.
- 3. I/We hereby declare that, as at the date of this declaration, I/we have reason to believe that the person subject to the Order for seizure will be at the Address together with the Infant.

Requesting party: Enter name and party type here Solicitor of requesting party (if any): Enter name here ²Address of Requesting party/solicitor: Enter address here E-mail address: Enter e-mail address here Contact number: Enter contact number here

Date of filing: Enter date here

² State requesting party's details (Address / e-mail address / contact number) if unrepresented. State solicitor's details if represented.

116C.

PDF UPLOAD

Para 158(6) PD 2024

Letter of Indemnity (Seizure of Infant)

Date: Enter date here Case number: Enter case number here Name of parties: Enter name of Applicant and Respondent here

The Bailiff

Dear Sir

- I confirm that I have obtained a Court Order under
 □ section 14 of the Guardianship of Infants Act 1934.
 □ section 126A of the Women's Charter 1961.
- As part of the Bailiff's expenses in enforcing the Order, □ I confirm that I have placed¹
 □ I undertake to place a deposit of \$300 to "Registrar, Supreme Court/AG".
- 3. I understand and agree that should the Bailiff's expenses of enforcement exceed \$300, I shall, as and when required by the Court or the Bailiff, provide sufficient funds to the Court or the Bailiff to meet the shortfall.
- 4. I shall pay all the costs, expenses and charges which may have to be incurred by the Court and or the Bailiff in connection with this Order including the enforcement thereof.
- 5. I shall indemnify and keep the Family Justice Courts and the Bailiffs indemnified at all times hereinafter against
 - a. all claims and payments for which the Family Justice Courts or the Bailiffs may, in the course of enforcing this Order, be rendered legally liable; and
 - b. all actions, suits, proceedings, claims, demands, costs and expenses whatsoever which may be taken or made against the Family Justice Courts or the Bailiffs or incurred or become payable by the Family Justice Courts or the Bailiffs in the course of enforcing this Order.

Signature of \Box Applicant \Box Respondent Name: Enter name here

¹ If this option is selected, provide the cheque number.

117A.

Para 10A PD 2024

Details of Parties

Request for Assistance to the Immigration and Checkpoints Authority ("ICA")

Case No: Enter case no. here

Request for Assistance to the Immigration and Checkpoints Authority ("ICA")

I, [Enter name of requestor here], [Enter NRIC/Passport/Other identification document no. here], am \Box an applicant \Box a respondent in the above matter in which there is, in force, an Order of Court from the Family Justice Courts dated [Enter date here] restraining one or both parent(s) from taking the child(ren) out of Singapore without the consent of the Court or the other or both parent(s), which Court Order is currently in effect (hereinafter referred to as "**this Order**") hereby request ICA assistance to stop the child(ren) from being taken out of Singapore.

Details of Fattes	
Name of Applicant:	Enter name here
NRIC/FIN No.:	Enter NRIC/FIN no. here
Passport No.:	Enter passport no. here
Address:	Enter address here
E-mail address:	Enter e-mail address here
Mobile number:	Enter number here
Contact details of solicitors (if any):	Enter contact details here

2. The following are the relevant information:

Name of Respondent:	Enter name here
NRIC/FIN No.:	Enter NRIC/FIN no. here
Passport No.:	Enter passport no. here
Address:	Enter address here
E-mail address:	Enter e-mail address here
Mobile number:	Enter number here
Contact details of solicitors (if any):	Enter contact details here

Details of Child(ren)¹

Full name of child involved:	Enter name here
BC/NRIC/FIN No.:	Enter BC/NRIC/FIN no. here
Passport No.:	Enter passport no. here

- 3. In the event I notify the ICA of the Order, I will provide the ICA with:
 - (a) copies of the NRIC/Passport of both parties, where available;
 - (b) copy(ies) of the birth certificate/NRIC of the child(ren), where available;
 - (c) copy(ies) of the passport of the child(ren), where available.
- 4. If there are any changes to the details of the above information and/or the documents set out in paragraphs 2 and 3, I shall inform the ICA immediately.
- 5. If I notify the ICA of this Order and this Order subsequently ceases to have effect or is varied or, either party consents for the other party to remove the child(ren), whether for a specific purpose only or generally, I shall <u>immediately</u> notify the ICA of the same via e-mail <u>ICA_FJC_Notification@ica.gov.sg</u>, copying the other party, during the ICA's working hours only (Mondays to Fridays: 8am to 5pm, Public Holiday Eves: 8am to 12pm, Saturdays, Sundays and Public Holidays: Closed) and at least 1 working day in advance before the ICA is to stop acting on this Order.
- 6. I shall attach to the email copies of the necessary documentation evidencing the cessation or variation of the Order, or the relevant party's consent, whichever is applicable. If the party concerned consents for the other party to remove the child(ren), whether for a specific purpose only or generally, the consent shall be given in Form 117B of Appendix A of these Practice Directions.
- (7) I understand that
 - (a) due to practical limitations, the ICA may only be able to act on the Order 1 working day after notification;
 - (b) if I notify the ICA outside of the ICA's working hours, the ICA may only be able to act on the Order after 2 working days; and
 - (c) I can consult a solicitor before giving this form to the ICA.

Signature of requestor
Applicant
Respondent
Date: Enter date here

¹ Use a separate table for each child.

117**B**.

Para 10A PD 2024

Letter of Consent for International Travel of Child(ren)

Case No: Enter case no. here

I, [Enter full name of consenting parent here] ([Enter NRIC/FIN/Passport No. here]), do state that under a Court Order, I am the parent having \Box sole \Box joint custody of the following child(ren), which Order prohibits the child(ren) leaving Singapore without my consent:

[Note: Please insert particulars of child(ren) travelling. Insert table for more than 2 children.]

1 st Child	
Full name of child:	Enter name here
Gender:	□ Male □ Female
Date of birth:	Enter date here
Nationality:	Enter nationality here
Passport No.:	Enter passport no. here
BC/NRIC/FIN (if applicable) No.:	Enter BC/NRIC/FIN no. here

2 nd Child

Full name of child:	Enter name here
Gender:	□ Male □ Female
Date of birth:	Enter date here
Nationality:	Enter nationality here
Passport No.:	Enter passport no. here
BC/NRIC/FIN (if applicable) No.:	Enter BC/NRIC/FIN no. here

- 2. I have notified and provided ICA with a copy of the Order of Court dated [Enter date here] and my Form 117A on [Enter date here].
- 3. I hereby consent for the above child(ren) to be taken out of Singapore by:

Full name of restricted parent /	Enter name here
restricted parent's servant or	
agent:	
Gender:	□ Male □ Female
Date of birth:	Enter date here
Nationality:	Enter nationality here
Passport No.:	Enter passport no. here
NRIC/FIN No. (if applicable):	Enter NRIC/FIN no. here

Local Handphone No.

Enter number here

4. This consent is

 \Box permanent.

□ is for any time during the period [Enter date here] to [Enter date here] (both dates inclusive).

- 5. If there are any questions regarding this consent, I can be contacted at [Enter handphone no. of consenting parent/legal guardian here].
- 6. I declare that the particulars and information provided are true and correct. I understand that I may be liable for prosecution for any false declarations made herein.

Signature Name: Enter name here Date: Enter date here

Para XX PD 2024

118.

E-FORM

Interim Adoption Order

(Title as in action)

INTERIM ADOPTION ORDER

Order is valid only if engrossed with the seal of the Court and signature of the Registrar.

Case / Application No: Enter case/application number here.

Date order was made: Enter date here.

Order made in: \Box Open court / \Box Chambers

Coram:
Judge /
District Judge [Enter name here]

- 1. Parties present at the hearing:
 - □ Male applicant
 - □ Female applicant
 - \Box Applicant(s)'s solicitor
 - □ Biological mother
 - □ Biological father
 - □ Biological mother's/father's solicitor
 - Guardian-in-Adoption [Enter name of Child Welfare Officer here]
- 2. Orders made pending the final determination of the Originating Application:
 - □ The Applicant(s) shall have the custody of the said child for [Enter duration of interim adoption order here] with effect from [Enter date of commencement of probationary period here].
 - □ The Applicant(s) shall be subject to the supervision of [Enter name and designation here] and who shall be at liberty at all reasonable times to visit and interview the child alone and to make all necessary inquiries as to the comfort and well-being of the child.
 - □ The Guardian-in-Adoption shall submit to the Court a further affidavit to report on the interim adoption order by [Enter submission of date of report here].
 - □ This order shall be reviewed on [Enter date of review here].
 - ☐ As regards costs, [Enter details here].
 - ☐ Any of the parties including the Guardian-in-Adoption of the said child may apply to the Court for further orders.

□ Others: To specify if any other orders given

119A.

Para XX PD 2024

E-FORM

Adoption Order (Child Born in Singapore)

(Title as in action)

ADOPTION ORDER

(Order where child is born in Singapore)

Order is valid only if engrossed with the seal of the Court and signature of the Registrar.

Case / Application No: Enter case/application number here.

Date order was made: Enter date here.

Order made in: \Box Open court / \Box Chambers

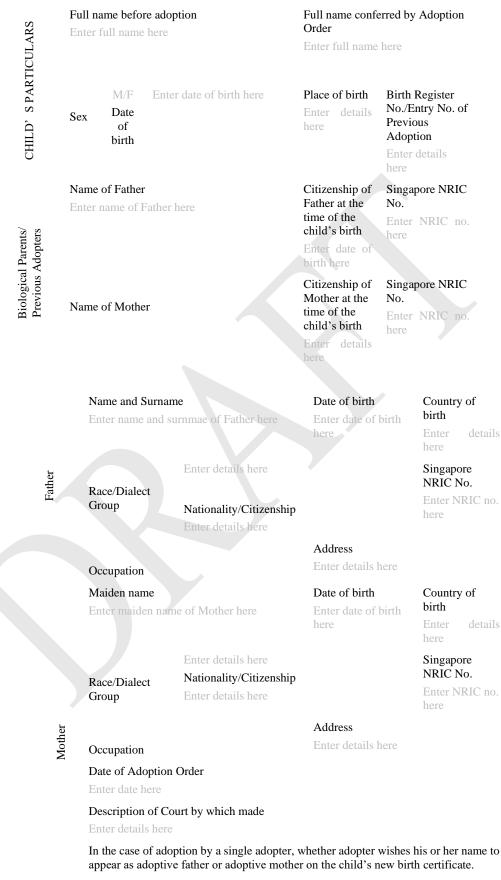
Coram:
Judge /
District Judge [Enter name here]

- 1. Parties present at the hearing:
 - □ Male applicant
 - □ Female applicant
 - □ Applicant(s)'s solicitor
 - □ Biological mother
 - □ Biological father
 - □ Biological mother's/father's solicitor

Guardian-in-Adoption [Enter name of Child Welfare Officer here]

- 2. Orders made:
 - ☐ The Applicant(s) be authorised to adopt the said child [Enter original name of child here] to be called [Enter proposed name of child here] born on [Enter date of birth here], which date is identical with the entry numbered [Enter birth certificate number here] and made on [Enter date of birth certificate here] in the Register of Births for the Republic of Singapore.
 - ☐ The Applicant(s) pay(s) the costs of these proceedings to the Guardian-in-Adoption.
 - □ Others: To specify if any other orders given

SCHEDULE



 \Box Yes \Box No

ADOPTIVE PARENTS

119B.

Para XX PD 2024

E-FORM

Adoption Order (Child Born Outside Singapore)

(Title as in action)

ADOPTION ORDER

(Order where child is born outside Singapore)

Order is valid only if engrossed with the seal of the Court and signature of the Registrar.

Case / Application No: Enter case/application number here

Date order was made: Enter date here

Order made in: \Box Open court / \Box Chambers

Coram:
Judge /
District Judge [Enter name here]

- 1. Parties present at the hearing:
 - \Box Male applicant
 - ☐ Female applicant
 - □ Applicant(s)'s solicitor
 - □ Biological mother
 - □ Biological father
 - □ Biological mother's/father's solicitor
 - Guardian-in-Adoption [Enter name of Child Welfare Officer here]
- 2. Orders made:
 - ☐ The Applicant(s) be authorised to adopt the said child [Enter original name of child here] to be called [Enter proposed name of child here] born on [Enter date of birth here].
 - ☐ The Applicant(s) pay(s) the costs of these proceedings to the Guardian-in-Adoption
 - □ Others: To specify if any other orders given

SCHEDULE



ADOPTIVE PARENTS

- 1. No. of Entry: Enter details here
- 2. Date and country of birth of child: Enter date of birth here / Enter country of birth here
- 3. Name and surname of child: Enter name and surname of child here
- 4. Sex of child: M/F
- 5. Name and surname, address and occupation of adopter or adopters: Enter name and surname, address and occupation of adopter(s) here
- 6. Date of adoption order and description of Court by which made: Enter date adoption order here / Enter description here
- 7. Date of Entry: Enter date here
- 8. Signature of officer deputed by Registrar-General to effect the entry:

120.

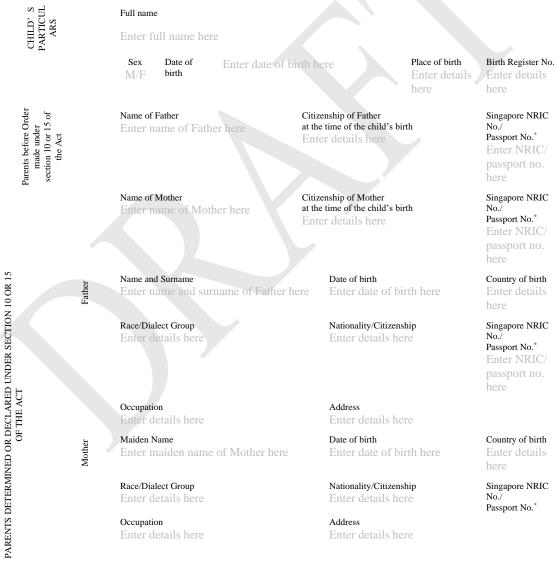
PDF UPLOAD

Schedule to the Order of Court (For Determination or Declaration of Parenthood)

This Schedule is to be included in the Order of Court (Form 114).

THE SCHEDULE

PARENTHOOD DETERMINED OR DECLARED UNDER SECTION 10 OR 15 OF STATUS OF CHILDREN (ASSISTED REPRODUCTION TECHNOLOGY) ACT 2013



Date of Order made under Section 10 or 15 of the Act: Enter date here

Description of Court by which made: Enter details here

(* Passport number to be stated where person is not a citizen or permanent resident of Singapore)

1

121.

E-FORM

P.23, r.2(3) FJ(G)R 2024

Enforcement Order

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

(Title as in action)

ENFORCEMENT ORDER

Are you seeking to enforce outside office hours? \Box Yes \Box No

Before: Select the applicable option¹ Enter name of judicial officer here. Date of Order: Enter date here

This enforcement order authorises the Bailiff to do the following²:

- 1. To seize and sell all property belonging to the enforcement respondent and specified in the Schedule below, with a value of up to a maximum of \$[Enter sum here], comprising the following:
 - a) amount due to the enforcement applicant (including interest and costs): \$[Enter sum here]
 - amount of enforcement costs estimated at:
 \$[Enter sum here] (due to the Bailiff)
 \$[Enter sum here] (due to the enforcement applicant);
- 2. to seize and deliver or give possession of property in the possession or control of the enforcement respondent and specified in the Schedule below;
- 3. to attach a debt which is due to the enforcement respondent from any non-party and specified in the Schedule below, with a value of up to a maximum of \$[Enter sum here], comprising the following:

a) amount due to the enforcement applicant (including interest and costs):\$[Enter sum here]

b) amount of enforcement costs estimated at: \$[Enter sum here] (due to the Bailiff)

¹ The applicable options are: Assistant Registrar / Judge / Judicial Commissioner / District Judge / Deputy Registrar / Magistrate / Registrar / Others.

² Include the order(s) as applicable and re-number the paragraph(s) accordingly.

\$[Enter sum here] (due to the enforcement applicant);

4. to do the following as specified in the Court order:

- a) [State the orders made]
- b) [State the orders made]
- c) [State the orders made]

Notes:

- 1. This enforcement order is valid in the first instance for 12 months beginning with the date of issue.
- 2. The properties, the financial institution and the deposits or money to be seized must be described with sufficient details.
- 3. Where the property to be seized is immovable property, its address and registration number and details in the Singapore Land Authority must be stated.

Schedule³

For seizure of movable property

Address for seizure: Enter address here

Property to be seized: \Box All movable property found at the address for seizure \Box [State description and type of property]

Value or estimated value of property to be seized (if available): Enter amount here

For delivery of possession of property

Address for seizure: Enter address here Property to be seized: State description and type of property

For immovable property

Interest of enforcement respondent in the immovable property specified below: CT/SSCT/SCT/Lease: Enter details here ⁴Volume No.: Enter no. here ⁴Folio No.: Enter no. here Mukim No.: Enter no. here Town Subdivision No.: Enter no. here Whole/part lot: Enter details here Property Address: Enter address here

For attachment of debt

Nature of debt to be attached: Enter details here Name of non-party/financial institution: Enter details here

³ Include as applicable.

⁴ If title document is a lease, to cancel the Vol No. and Fol No. and simply state the Lease No.

122.

P.23, r.3 FJ(G)R 2024

Consent to Entry of Satisfaction

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹

Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

CONSENT TO ENTRY OF SATISFACTION

I, [Enter name here] of [Enter address here] being the applicant (or as may be) named in and the sole person entitled to the benefit of the judgment herein hereby consent to a memorandum of satisfaction of the said judgment being recorded.

²Applicant (or as may be).

The Statutory Declaration is to be sworn / affirmed in accordance with the Form of Attestation (Form 106) of the Family Justice (General) Rules 2024.

²Solicitor for the Applicant (or as may be)

[Name, address, email address and telephone number of solicitor]

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¹ To insert sub-case details if relevant.

² Use as appropriate.

123.

P.23, r.6(5) FJ(G)R 2024

Notice of Seizure/Attachment

Notice is valid only if engrossed with the seal of the Court and signature of the Bailiff

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹ Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

NOTICE OF SEIZURE/ATTACHMENT

Case No:	Enter case no. here
Sub-Case No:	Enter sub-case no. here
Before:	Select the applicable option ² Enter name of judicial officer
here.	
Venue:	□ Family Justice Courts □ Supreme Court Enter court /
	chamber no. here in \Box Open court \Box Chambers
Hearing date/time:	Enter date here
Date of enforcement order:	Enter date here

To:

1. Pursuant to the above enforcement order, the Bailiff now seizes or attaches³:

- (a) [the properties, the financial institution, the non-party and the deposits or money to be seized or attached must be described with sufficient details].
- (b) [the properties as set out in the Schedule of the enforcement order].
- (c) [Enter others here]

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¹ To insert sub-case details if relevant.

² Assistant Registrar / Judge / Judicial Commissioner / District Judge / Deputy Registrar / Magistrate / Registrar

[/] Others.

³ Include the appropriate order.

- 2. Once this Notice of Seizure or Attachment is served on you, you are not to deal with or dispose of the properties, deposits or money described in paragraph 1, unless the Court otherwise orders.
- 3. If the enforcement order is for attachment of deposits or money, (a) you must, within 14 days of service of this Notice of Seizure or Attachment, inform the Bailiff of the amount owing to the enforcement respondent that is available to be attached; and (b) you must not deal with or dispose of the deposits or money until after 21 days have passed after the date of service of this Notice of Seizure or Attachment, or if a notice of objection is filed under Part 23 Rule 10 of the Family Justice (General) Rules 2024, until after the notice of objection has been determined in the manner set out in Rule 10. If no notice of objection is filed under Rule 10, you are to hand over or pay to the enforcement applicant the deposits or money due to the enforcement respondent and to the Bailiff the commission due to the Bailiff, within 7 days after 21 days have passed after the date of service of this Notice of Seizure or Attachment. If you have received notice of objection given by the enforcement respondent or any non-party objecting to the attachment of the deposits or money, you must not deal with or dispose of the deposits or money and must not hand over or pay the deposits or money until otherwise informed or instructed by the Bailiff.
- 4. If you have made a claim for costs of \$100 from the Bailiff within 14 days of service of this Notice of Seizure or Attachment (see Note 1), you can deduct the costs of \$100 from the amount that you must hand over or pay to the enforcement applicant.
- 5. When you hand over or pay the deposits or money to the enforcement applicant and the commission to the Bailiff, you must state in an accompanying letter signed by you or your solicitor:
 - (a) the amount that is due to the enforcement respondent;
 - (b) the amount that you have deducted/withheld; and
 - (c) the reason for the deduction/withholding of the amount.
- 6. If the enforcement order is for the sale of seized movable property, the Bailiff may take steps to sell the seized movable property after 14 days after a copy of the Notice of Seizure or Attachment has been served on the enforcement respondent, unless the movable property is perishable or unless the Court otherwise orders.
- 7. If the enforcement order is for the sale of seized immovable property, the Bailiff may take steps to sell the seized immovable property after 30 days after a copy of the Notice of Seizure or Attachment has been served on the enforcement respondent, unless the Court otherwise orders.

Notes:

1. A non-party (who is anyone who is not the enforcement respondent or his employee) who is served with this Notice of Seizure or Attachment is entitled to claim costs of

\$100 from the Bailiff (to be deducted from the debt owing from the non-party to the enforcement respondent which is attached under this Notice of Seizure or Attachment) provided the claim is made within 14 days of service of this Notice of Seizure or Attachment.

- 2. Where the enforcement respondent or any non-party (collectively "the objector") objects to any seizure of property or attachment of debt by the Bailiff, he or she must, within 14 days of service of this Notice of Seizure or Attachment, give notice of his or her objection in writing to the Bailiff by filing a notice of objection and serving a copy of the notice of objection on the enforcement applicant, the enforcement respondent (if not the objector) and any non-party served with this Notice of Seizure or Attachment (if not the objector).
- 3. The notice of objection must identify the objector, specify the property in dispute, state the grounds of objection and include any evidence supporting the grounds of objection.
- Contact details of the Bailiff: [name of officer(s) in charge, address, email address and telephone number].
- 5. Contact details of the enforcement applicant or his or her solicitor: [name, address, email address and telephone number].
- 6. Contact details of the enforcement respondent or his or her solicitor: [name, address, email address and telephone number].

124.

E-FORM

P.23, r.11, P.3, r.30(4) FJ(G)R 2024

Order for Examination of Enforcement Respondent

Order is valid only if engrossed with the seal of the Court and signature of the Registrar

(Title as in action)

ORDER FOR EXAMINATION OF ENFORCEMENT RESPONDENT

Case No:	Enter case no. here			
Sub-Case No:	Enter sub-case no. here			
Before:	Select the applicable option ¹ Enter name of judicial officer here.			
Venue:	[Supreme Court / Family Justice Courts]			
	□ Open court / □ Chambers			
Hearing date/time:	Enter date here			

The Court made the following orders in the above action application²:

- The □ enforcement respondent □ officer of the enforcement respondent must attend before the Registrar on the date and time shown above and be orally examined in court
 □ and □ or make an affidavit on the properties which are owned by the enforcement respondent beneficially whether in whole or in part or which the enforcement respondent will be entitled to in the future.
- 2. ³The □ enforcement respondent □ officer of the enforcement respondent is to complete the attached questionnaire and to serve the completed questionnaire with the documents specified in the questionnaire within 14 days of service on the □ enforcement respondent □ officer of the enforcement respondent.
- 3. The \Box enforcement respondent \Box officer of the enforcement respondent is to produce [State the documents the Court has ordered production of].
- 4. [State costs order made].

¹ The applicable options are: Assistant Registrar / Judge / Judicial Commissioner / District Judge / Deputy Registrar / Magistrate / Registrar / Others.

² Include the order(s) as applicable and re-number the paragraph(s) accordingly.

³ This paragraph may be included if the enforcement applicant has obtained such an order from the Court.

Date of order: Enter date here

Notes:

- 1. The person or entity served with this judgment/order and who/which has been ordered to pay money, to do or not to do any act must comply immediately or within the time specified in the judgment/order, if any.
- 2. Failure to comply may result in enforcement of judgment/order proceedings, including contempt of Court proceedings, against the said person or entity.

125.

Para 121(1) PD 2024

Request for Attendance of the Bailiff

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹ Between

[Applicant's name] [ID No.]

... Applicant(s)

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And

[Respondent's name] [ID No.]

... Respondent(s)

REQUEST FOR ATTENDANCE OF THE BAILIFF

I, [Enter name of party making request here], being [Enter party type here, e.g. the applicant, respondent, applicant/respondent's employee, solicitor for the applicant/respondent/employee, as the case may be], hereby request that the Bailiff do attend at [Enter the address for the attendance here] on [Enter the desired date and time of attendance here] for the purpose of [Enter the reason for the attendance here].

I undertake to pay the fees prescribed under the Third Schedule to the Family Justice (General) Rules 2024 in respect of the attendance requested above.

Issued by: Party or Solicitor [Name, address, email address and telephone number]

¹ To insert sub-case details if relevant.

PDF UPLOAD

Para y(1) PD 2024 P.3, r.29, P.23, r.10 FJ(G)R 2024

Notice of Objection (Enforcement)

If you are filing this form in iFAMS, only the parts in blue boxes are applicable to you.

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹ Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

NOTICE OF OBJECTION (ENFORCEMENT)

Are you objecting to the seizure of property or attachment of debt? □ Seizure □ Attachment

State the date and type of appointment: [Enter date here] for \Box Seizure \Box Attachment

Case No: Enter case no. here Application No: Enter application no. here Date: Enter date here

- To: The Bailiff², the enforcement applicant, the enforcement respondent (if not the objector) and any non-party served with the notice of attachment (if not the objector)
- 1. Take notice that I [Enter name of objector here] of [Enter address here] object(s) to the seizure of the following property or attachment of the following debt by the

¹ To insert sub-case details if relevant.

² Delete "Bailiff" if this Form is used in an Enforcement Order (pursuant to section 71(1)(c) of the Women's Charter 1961.

Bailiff² / enforcement applicant in this action at [Enter address here] on [Enter date here]:

Description of property or debt in	Ground(s) of objection		
dispute			
[State the property or debt in dispute	[State ground(s) of objection here]		
here]			

2. The evidence in support of this objection is stated in the accompanying affidavit of [State the name of the person making the affidavit and the filing date]

Please acknowledge that in addition to the filing of this objection, a copy of the notice of objection has to be served on the enforcement applicant, the enforcement respondent (if not the objector) and any non-party served with the notice of attachment (if not the objector), within 14 days after the service of the notice of seizure or attachment \Box Yes \Box No

Party

[Name, address, email address and telephone number]

127.

E-FORM

Para y(2) PD 2024 P.3, r.29, P.23, r.10 FJ(G)R 2024

Consent to Release

If you are filing this form in iFAMS, only the parts in blue boxes are applicable to you.

(Title as in action)

CONSENT TO RELEASE

Which Notice of Objection is this Consent to Release filed in respect of?

[Enter date of filing of Notice of Objection] **by** [Enter party who filed the Notice of Objection here]

Case No: Enter case no. here Application No: Enter application no. here Date: Enter date here

To: The Bailiff¹ and the objector

Take notice that I [Enter name of enforcement applicant here] □ partially consent
 □ consent to the release from seizure or attachment of the following property or debt:

Description of property of debt to be released from seizure or attachment Enter details here

Party

[Name, address, email address and telephone number]

¹ Delete "Bailiff" if this Form is used in an Enforcement Order (pursuant to section 71(1)(c) of the Women's Charter 1961

128.

E-FORM

P.23, r.10 FJ(G)R 2024

Notice of Dispute to Objection

If you are filing this form in iFAMS, only the parts in blue boxes are applicable to you.

(Title as in action)

NOTICE OF DISPUTE TO OBJECTION

Which notice of Objection is this Notice of Dispute to Objection filed in respect of? [Enter date of filing of Notice of Objection] by [Enter party who filed the Notice of Objection here]

State the date and type of appointment: [Enter date here] for \Box Seizure \Box Attachment

Case No: Enter case no. here Application No: Enter application no. here Date: Enter date here

To: The Bailiff¹ and the objector

1. Take notice that I [Enter name of enforcement applicant here]
partially dispute
dispute the objection of [Enter name of objector here] in respect of the seizure of the following property or attachment of the following debt by the Bailiff² / enforcement applicant in this action at [Enter address here] on [Enter date here]:

Description of property or debt in dispute [State the property or debt in dispute]

Party

[Name, address, email address and telephone number]

¹ Delete "Bailiff" if this Form is used in an Enforcement Order (pursuant to section 71(1)(c) of the Women's Charter 1961.

129.

E-FORM

Para y(3) PD 2024 P.3, r.29, P.23, r.3, r.10 FJ(G)R 2024

Summons / Application for Order Determining the Ground of Objection

(Title as in action)

SUMMONS / APPLICATION FOR ORDER DETERMINING THE GROUND OF OBJECTION

Case No:	Enter case no. here
Summons / Application No:	Enter application no. here
Date:	Enter date here

- To: The objector, the enforcement respondent (if not the objector) and any non-party served with the notice of attachment (if not the objector)
- 1. The enforcement applicant [Enter name of enforcement applicant here] of [Enter address here] is applying to the Court for the following orders:
 - (a) That the objection notified by way of the Notice of Objection filed on [Enter filing date here] in this action be dismissed and the following property seized or debt attached by the Bailiff in this action at [Enter address here] on [Enter date here] be dealt with as subject to the enforcement order filed on [Enter filing date here].

[State the property or debt in dispute]

- (b) [Set out all other orders sought in numbered paragraphs]
- 2. The evidence in support of this application is stated in the accompanying affidavit of [state the name of the person making the affidavit and the filing date].
- 3. If you wish to contest the application, you must:
 - (a) file an affidavit in reply if you also wish to introduce evidence in this application within 14 days of being served this application and supporting affidavit(s); and
 - (b) attend at the Family Justice Courts on the date and time shown above (if any). If you do not attend personally or by lawyer, the Court may make appropriate orders.

Solicitor for the [state the party]

[Name, address, email address and telephone number of solicitor]

130.

E-FORM

Para y(4) PD 2024 P.23, r.3, r.10 FJ(G)R 2024

Summons / Application for Order to Release Property / Debt

Summons is valid only if engrossed with the seal of the Court and signature of the Registrar

If you are filing this form in iFAMS, only the parts in blue boxes are applicable to you.

Notice of Objection which this application relates to: Enter details here

(Title as in action)

SUMMONS / APPLICATION FOR ORDER TO RELEASE PROPERTY / DEBT

Case No:	Enter case no. here
Summons / Application No:	Enter application no. here
Date:	Enter date here

- To: The enforcement applicant, the enforcement respondent (if not the objector) and any non-party served with the notice of attachment (if not the objector)
- 1. The objector [Enter name of objector here] of [Enter address here] is applying to the Court for the following orders:
 - (a) That the following property seized or debt attached by the ¹□ Bailiff □ enforcement applicant in this action at [Enter address here] on [Enter date here] be released forthwith.

[State the description of property or debt in dispute]

- (b) [Set out all other orders sought in numbered paragraphs]
- 2. The evidence in support of this application is stated in the accompanying affidavit of [state the name of the person making the affidavit and the filing date].
- 3. If you wish to contest the application, you must:
 - (a) file an affidavit in reply if you also wish to introduce evidence in this application within 14 days of being served this application and supporting affidavit(s); and

¹ To select enforcement applicant only if the enforcement order is made pursuant to section 71(1)(c) of Women's Charter 1961. In all other cases, select Bailiff.

[^] Delete where inapplicable

(b) attend at the Family Justice Courts on the date and time shown above. If you do not attend personally or by lawyer, the Court may make appropriate orders.

Solicitor for the [*state the party*] [Name, address, email address and telephone number of solicitor]

131A.

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Para. 122(1) PD 2024

Questionnaire for the Examination of Individual Enforcement Respondent

This questionnaire is to be served together with the Order for Examination of Enforcement Respondent containing the seal of the Court and signature of the Registrar

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹ Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

QUESTIONNAIRE FOR THE EXAMINATION OF INDIVIDUAL ENFORCEMENT RESPONDENT

Please be informed that you, [Enter name of enforcement respondent here], have been summoned by the abovementioned enforcement applicant to attend at the \Box Family Court \Box Family Division of the High Court on [Enter date here] at [Enter time here] to:

- (a) provide answers to the questions set out in this document; and
 - (b) produce documents set out below:
 - (i) your bank statements for the past 6 months;
 - (ii) your payslips for the past 3 months;
 - (iii) your income tax returns and Form IR8A for the last period of assessment;
 - (iv) your last 3 statements from the Central Provident Fund (CPF) Board;
 - (v) your last 3 statements from the Central Depository (CDP) and/or your securities broker or fund manager in respect of your shares, bonds and/or unit trusts;
 - (vi) your motor vehicle log card/printout of your vehicle registration details and hire purchase agreement in respect of your motor vehicle;
 - (vii) your lease agreements, title deeds or certificates of title in respect of your properties, or your rental agreements.

¹ To insert sub-case details if relevant.

Please answer these questions carefully as the Court will require you to confirm on oath that your answers are true to the best of your knowledge, information and belief. Please bring this completed questionnaire and the documents with you at the Court hearing.

IMPORTANT NOTICE: You are required to attend the hearing unless you have obtained the consent of the enforcement applicant to dispense with your attendance in Court or to discharge the Order requiring your attendance. If you fail to attend the hearing without obtaining the consent of the enforcement applicant, the enforcement applicant may commence committal proceedings against you for your failure to attend Court. The penalty that may be imposed by Court for such failure is fine and/or imprisonment.

You may therefore wish to contact the solicitor for the enforcement applicant [Enter name of law firm and solicitor having conduct of the case here] at [Enter address and telephone contact no. here] to obtain the consent of the enforcement applicant for the necessary dispensation and discharge. You may also choose to engage your own solicitor to advise you on your rights and duties in relation to these proceedings.

Section 1: Personal particulars

1.	Full name:	Enter name here
2.	NRIC/Passport no.:	Enter NRIC/passport no. here
3.	Home address:	Enter address here
4.	Mobile number:	Enter no. here
5.	Email address:	Enter email address here

Section 2: Work particulars

6.	Occu	Occupation: Enter occupation here					
7.	If you are an employee, please state the following:						
	(a) the name and address of your employer;						
	Enter name and address of employer here						
	(b) your monthly income ² ; and						
	Enter monthly income here						
	(c) when your monthly income is paid to you and how you are paid (whether by						
		GIRO or otherwise).					
	Enter details here						
8.	· If you are self-employed, please state the following:						
	(a) the name and address of your business (sole proprietorship or partnership);						
	Enter name and address of business here						
	(b) the nature of the business; and						
	Enter details here						
	(c) your monthly income including salary, allowances, commissions and bonuses.						
	Enter details here						
9.	Aside from your income from your employment, please state all your other sources o						
	incor	ne ³ and the amount received.					
	Enter	r details here					

Section 3: Particulars of your Debtors

10.

Please state whether you have any debtors⁴.

☐ Yes. If yes, please provide details in Annex A.

² Income includes salary, allowances, commissions and bonuses.

³ Sources of income includes rental, dividends, royalties from intellectual property.

⁴ Debtors are people who owe you money.

\square INO.

<mark>Section 4:</mark> Particulars of your immovable properties situated locally or overseas

11.	Pleas	Please state the following if you own any immovable property ⁵ locally or overseas:				
	(a) the address(es) of property owned;					
	Enter name and address of employer here					
	(b) the names of joint-owners (if any); and					
	Enter details here					
	(c) the names of mortgagee/chargee (if any) and the amount outstanding.					
	Enter details here					
12.	Please state if you are leasing any immovable property.					
	□ Yes. If yes, please provide details in Annex B.					
	\Box No.					
13.	Please state if you have any tenants/subtenants in respect of your owned or leased properties.					
	$\Box Y$	es. If yes, please provide details in Annex B.				
	\square No.					

Section 5: Particulars of your motor vehicles

14. _]	Please state if you own a motor vehicle.
	Yes. If yes, please provide details in Annex B.
	□ No.

Section 6: Particulars of your bank accounts

15. Please state the following if you have any bank accounts ⁶ or safe deposit bo				
	(a)	name and branch of the Bank where your account or safe deposit box is maintained;		
		Enter details here		
	(b)	the account number;		
	Enter	r details here		
	type of account held (e.g. current, savings, fixed deposit, overdraft);			

⁵ Immoveable property means houses, apartments etc.

⁶ Bank accounts include accounts held in your sole name or jointly with others.

Enter details here

(d) name of joint account holder (if any);

Enter details here

(e) the balance due to you at this date (for fixed deposits, please state the date of maturity and the amount due to you at that date).

Enter details here

Section 7: Particulars of your other assets

16.	Please state if you have any insurance policies.				
	□ Yes. If yes, please provide details in Annex C.				
	□ No.				
17.	Please state if you own any shares and/or unit trusts.				
	□ Yes. If yes, please provide details in Annex C.				
	\Box No.				
18.	Please state if you are a beneficiary under any trust, will or estate in intestacy.				
	□ Yes. If yes, please provide details in Annex C.				
	□ No.				
19.	Please state if you are a member (whether in Singapore or overseas) of any country clubs, timeshare holiday clubs.				
	\Box Yes. If yes, please provide details in Annex C.				
	\Box No.				
20.	Please state if you own any other assets, savings or investments not listed thus far (e.g. antiques, collectibles, jewellery, paintings).				
	□ Yes. If yes, please provide details in Annex C.				
	\Box No.				
21.	What offer of repayment do you wish to make to the judgment creditor?				
	Enter details here				

Section 8: Additional questions by the enforcement applicant

22. [State additional questions if any]

Section 9: Confirmation statement

I, [Enter name of enforcement respondent and NRIC No. here] confirm that my answers to the questions above are true to the best of my knowledge, information and belief.

Signature of enforcement respondent Enter date here

Annex A: Particulars of Debtors and Creditors

(From Question 10)

(1) Please list the names of your **debtors** (i.e. people who owe you money) as follows:

Name	Contact Particulars	Amount owed	Due date for payment	How did the debt arise?

(2) Please state the following if you have commenced legal proceedings against your **debtors** to recover your debt:

Name of Debtor	Suit No.	Amount claimed	Status of action

Annex B: Particulars of Property Owned or Rented

(From Question 12)

Please provide details of the immoveable property that you have leased out:

(1)	Name of landlord:	Enter name here
(2)	Address of rented property:	Enter address here
(3)	Period of tenancy:	Enter details here
(4)	Amount of monthly rental paid and due date of rental:	Enter details here
(5)	Whether there is any written tenancy agreement:	Enter details here

(From Question 13)

Please provide details of the tenancy of any immoveable property that you own:

(6)	Name of tenant:	Enter details here
(7)	Address of tenanted property:	Enter details here
(8)	Period of tenancy:	Enter details here
(9)	Amount of monthly rental received and due date of rental:	Enter details here
(10)	Whether there is any written tenancy agreement:	Enter details here

(From Question 14)

Please provide details of any motor vehicles that you own:

(11)	The registration number of the motor vehicle(s):	Enter details here
(12)	The colour and make of the motor vehicle(s):	Enter details here
(13)	Whether the motor vehicle(s) is/are on hire purchase:	Enter details here
(14)	If on hire purchase, the name of the finance company and the amount outstanding under the hire purchase agreement:	Enter details here

Annex C: Particulars of Other Assets

Insurance Policies (From Question 16)

Name of Insurer	Type of policy/ Policy No.	Amount insured	Monthly premium payable

(1)	Please identify the	Enter details here
	beneficiaries under your	
	insurance policies apart from	
	yourself:	
(2)	If applicable, please state the	Enter details here
	dates when each of your	
	insurance policies will mature	
	and the surrender value as at	
	this date:	
Shares (From Question 17)		

Shares (From Question 17)

(3)	If you own shares, please state	Enter details here
	the name of the company and	
	the number of shares held. If	
	you use a securities broker,	
	please give particulars:	
(4)	If you own unit trusts, please	Enter details here
	state the name of the	
	bank/financial institution	
	managing your unit trusts:	
(5)	Please state the estimated	Enter details here
	value of the shares/unit trusts:	

Beneficiary of trust, will or estate in intestacy (From Question 18)

(6)	Please state the name of the	Enter details here
	person managing your	
	beneficial interest i.e. your	
	trustee, executor (where the	
	deceased left a will) or	

	administrator (where the deceased left no will):	
(7)	Please state the name of the party leaving you the beneficial interest:	Enter details here
(8)	Please state the value of your interest:	Enter details here
(9)	If probate or letters of administration have been granted, please state the case no. for the grant:	Enter details here

Other Assets (From Question 20)

(10)	Please provide details of the	Enter details here
	assets listed in Question 20	
	and state the estimated value	
	of each asset and the basis for	
	the estimation:	

131B.

PDF UPLOAD

Para. 122(1) PD 2024

Questionnaire for the Examination of Officer of Enforcement Respondent

This questionnaire is to be served together with the Order for Examination of Enforcement Respondent containing the seal of the Court and signature of the Registrar

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Main Case No.: Enter case no. here Sub Case No. [number]/[year]¹ Between

[Applicant's name] [ID No.]

... Applicant(s)

And

[Respondent's name] [ID No.]

... Respondent(s)

<u>QUESTIONNAIRE FOR THE EXAMINATION OF OFFICER OF ENFORCEMENT</u> <u>RESPONDENT</u>

Please be informed that you, [Enter name of officer of enforcement respondent here], have been summoned by the abovementioned enforcement applicant to attend at the \Box Family Court \Box Family Division of the High Court on [Enter date here] at [Enter time here] to:

- (a) provide answers to the questions set out in this document; and
- (b) produce documents set out below:
 - (i) the Company's bank statements for the past 6 months;
 - (ii) the Company's audited returns for the last period of assessment;
 - (iii) the Company's last 3 statements from the Central Provident Fund (CPF) Board;
 - (iv) the Company's last 3 statements from the Central Depository (CDP) and/or its securities broker or fund manager in respect of its shares, bonds and/or unit trusts;

¹ To insert sub-case details if relevant.

- (v) the Company's motor vehicle log card/printout of its motor vehicle registration details and hire purchase agreement in respect of the Company's motor vehicle;
- (vi) the Company's lease agreements, title deeds or certificates of title in respect of its properties, or its rental agreements.

Please answer these questions carefully as the Court will require you to confirm on oath that your answers are true to the best of your knowledge, information and belief. Please bring this completed questionnaire and the documents with you at the Court hearing.

IMPORTANT NOTICE: You are required to attend the hearing unless you have obtained the consent of the enforcement applicant to dispense with your attendance in Court or to discharge the Order requiring your attendance. If you fail to attend the hearing without obtaining the consent of the enforcement applicant, the enforcement applicant may commence committal proceedings against you for your failure to attend Court. The penalty that may be imposed by Court for such failure is fine and/or imprisonment.

You may therefore wish to contact the solicitor for the enforcement applicant [Enter name of law firm and solicitor having conduct of the case here] at [Enter address and telephone contact no. here] to obtain the consent of the enforcement applicant for the necessary dispensation and discharge. You may also choose to engage your own solicitor to advise you on your rights and duties in relation to these proceedings.

Section 1: Personal particulars

1.	Full name:	Enter name here
2.	NRIC/Passport no.:	Enter NRIC/passport no. here
3.	Home address:	Enter address here
4.	Mobile number:	Enter no. here
5.	Email address:	Enter email address here
6.	Please state the po	sition you are holding in the enforcement respondent ("the
	Company").	
	Enter details here	

Section 2: Company particulars

7.	Plea	se state if the Company is still carrying on business:		
	□ Y	□ Yes. If yes, please complete (a) to (c) below.		
	\Box No.			
	(a)	the business that the Company is presently engaged in;		
		Enter details here		
	(b)	the present location of the Company's business operations; and		
		Enter details here		
	(c)	whether the Company is making trading profits or losses.		
		Enter details here		
8.	Plea	Please state whether the Company declared any dividends this year or the last year:		
	□ Yes. If yes, please state when the dividends were declared, and how much was			
	decl	declared.		
	\Box N	\Box No.		

Section 3: Remuneration

9.	Please state if the officers of the Company, including yourself, receive remuneration for work done for the Company (i.e. salary or director's fees).
	\square Yes. If yes, please state how much remuneration each officer receives.
	□ No.

Section 4: Auditors

10.	Please state the name and address of the accountants and auditors of the Company. Enter details here
11.	Please state the date when the accounts of the Company were last audited. Enter details here
12.	Please state the date when the Company last filed its Annual Returns with the Accounting and Corporate Regulatory Authority. Enter details here

Section 5: Particulars of the Company's Debtors

13.	Please state whether anyone owes the Company money.				
	□ Yes. If yes, please provide the details in Annex A.				
	\Box No.				
14.	Please state whether the Company has taken any steps to apply or is it in the process of applying to Court for a Scheme of Arrangement to compromise its debts with its creditors under the Companies Act 1967 or the Insolvency, Restructuring and Dissolution Act 2018.				
	□ Yes. If yes, please state particulars. Enter details here				
	\Box No.				

Section 6: Particulars of immovable properties situated locally or overseas

15.	Pleas	se state whether the Company owns any immovable property ² locally or						
	overs	overseas. If yes, please provide the details in Annex B.						
	\Box N	\Box No.						
16.	Pleas	Please state the following if the Company is leasing any immovable property:						
	(a)	name of landlord and address of rented property;						
		Enter details here						
	(b)	period of tenancy, amount of monthly rental paid and due date of rental; and						
		Enter details here						
	(c)	whether there is any written tenancy agreement.						
		Enter details here						
17.		se state whether the Company has any tenants/subtenants in respect of the owned ased properties.						

² Immoveable property means houses, apartments etc.

☐ Yes. If yes, please provide the details in Annex B.☐ No.

Section 7: Particulars of the Company's motor vehicles

18. Please state if the Company owns any motor vehicle.

 \Box Yes. If yes, please provide the details in Annex B.

 \Box No.

Section 8: Particulars of the Company's bank accounts

19.	Please state the following if the Company has any bank accounts (held solely and/or jointly) or safe deposit boxes:						
	(f)	name and branch of the Bank where the account or safe deposit box is maintained;					
		Enter details here					
	(g)	the account number;					
		Enter details here					
	(h)	(h) type of account held (e.g. current, savings, fixed deposit, overdraft);					
		Enter details here					
	(i)	name of joint account holder (if any);					
		Enter details here					
	(j)	j) the balance due to the Company at this date (for fixed deposits, please state the date of maturity and the amount due to the Company at that date).					
		Enter details here					

Section 9: Particulars of the Company's other assets

20.	Please state if the Company has any insurance policies.		
	\Box Yes. If yes, please provide the details in Annex C.		
	\Box No.		
21.	Please state if the Company owns any shares and/or unit trusts.		
	Trease state if the Company owns any shares and/or unit trusts.		
	\Box Yes. If yes, please provide the details in Annex C.		

22. Please state if the Company owns any other assets³, savings or investment not listed thus far.

 \Box Yes. If yes, please provide the details in Annex C.

□ No.

Section 10: Other Matters

- 23. Are there any goods on the Company's premises that do not belong to the Company but belong to other people or are jointly owned with others? If so, please list the goods and how such ownership can be established.Enter details here
- 24. What offer of repayment do you wish to make to the enforcement applicant? Enter details here

Section 11: Additional questions by the enforcement applicant

25. [State additional questions if any]

Section 12: Confirmation statement

I, [Enter name of officer of enforcement respondent and NRIC No. here] confirm that my answers to the questions above are true to the best of my knowledge, information and belief.

Signature of officer of enforcement respondent Enter date here

³ Assets include antiques, collectibles, jewellery, paintings, royalties from intellectual property, club membership etc.

Annex A: Particulars of Debtors and Creditors

(From Question 13)

(3) Please list the names of the Company's **debtors** (i.e. people who owe the Company money) as follows:

Name	Contact Particulars	Amount owed	Due date for payment	How did the debt arise?

(4) Please state the following if the Company has commenced legal proceedings against its **debtors** to recover its debt:

Name of Debtor	Suit No.	Amount claimed	Status of action
			· · · · · · · · · · · · · · · · · · ·

Annex B: Particulars of Property Owned or Leased

(From Question 15)

(1) Please provide details of the properties owned by the Company:

Address of properties owned:	Enter address here
Names of joint-owners (if any):	Enter name here
Names of mortgagee/chargee (if any) and amount outstanding:	Enter details here

(From Question 17)

(2) Please provide details of the tenancy of any immoveable property that the Company own:

Name of tenant and address of tenanted property:	Enter details here
Period of tenancy, amount of monthly rental received and due date of rental:	Enter details here
Whether there is any written tenancy agreement:	Enter details here

(From Question 18)

(3) Please provide details of the vehicles the Company owns:

The registration number, make and colour of the motor vehicle(s):	Enter details here
Whether the motor vehicle(s) is/are on hire purchase:	Enter details here
If on hire purchase, the name of the finance company and the amount outstanding under the hire purchase agreement:	Enter details here

Annex C: Particulars of Other Assets

Insurance Policies (From Question 20)

Name of Insurer	Type of policy/ Policy No.	Amount insured	Monthly premium payable

(11)	Please identify the beneficiaries under the policies apart from the Company:	Enter details here
(12)	If applicable, please state the dates when each of the Company's policies will mature and the surrender value as at this date:	Enter details here

Shares/Unit Trusts (From Question 21)

(13)	If the Company owns shares	Enter details here
	in another company, please	
	state the name of the company	
	and the number of shares held.	
	If the Company has a	
	securities broker, please	
	provide particulars of the	
	same:	
(14)	If the Company owns unit	Enter details here
	trusts, please state the name of	
	the bank/financial institution	
	managing the unit trusts:	
(15)	Please state the estimated	Enter details here
Ň	value of the shares/unit trusts	
	and the basis for estimation:	

Other Assets (From Question 22)

(16)	Please provide details of the	Enter details here
	assets listed in Question 22	

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Requisition for Impressed Stamps

FAMILY JUSTICE COURTS, SINGAPORE REQUISITION FOR IMPRESSED STAMPS

Name of Applicant: Enter name here						Telephone No.:		
					Enter no	. here		
NRIC / UEN No: Enter NRIC/UEN no. here						Email		
Original ID sighted and verifi	Enter email							
by Registry Officer over Zoo	m:							
Address: Enter address here	Case No.							
	Enter case no.							
	here							
To note: Payment via CASH / NETS only								
Description of document(s) to be stamped	No. of documents	No. of pages (if	Duty on ea document		Total			
		applicable)	\$	С	\$	С		
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
Total no. of documents	Total amount payable							

Cashier

Receipt No.

Date