

## **Acceptance of Admission of Liability - Civil Dispute**

ACAT File Number:	XD
Applicant:	
Respondent:	
accept the terms on	which the respondent has admitted in full satisfaction of my claim.
Signature of applicant/applicant's representative:	
Name of applicant/ applicant's representative:	(Any representative who is not a lawyer must be properly authorised by an Authority to Act for a Corporation or a Power of Attorney)
Date:	