# 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 **NOT** 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.** | | | |
|  | | | |
|  | | *Notes* |
| |  |  | | --- | --- | | State the main case number: | Enter 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. | I am  the Applicant  the Respondent   |  |  | | --- | --- | |  | Enter full name or party type here. | |
| 2. | I wish to give notice of my intention to: |  |
| 2a. | withdraw the following document(s):   |  |  | | --- | --- | | Reply in | Enter case number here. | | [State document] in | Enter case number here. | | *Options 2a and 2b are applicable only if your case is filed in eLitigation.* |
| 2b. | discontinue the following legal proceedings:   |  |  |  | | --- | --- | --- | | Originating Application | | Enter case number here. | | Summons | | 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. | |  |  | | --- | --- | | Select the party whom you are withdrawing the document or discontinuing the action against. | Have you served the document(s) / proceeding(s) on this party? | | Applicant  Respondent  Co-Respondent  Enter full name or party type here. | No. *Proceed to sign below.*  Yes. *Proceed to sign and obtain the signature of the party giving consent to this Notice below.* | | *You may select more than one person / party. For iFAMS cases, the applicable options for selection are Applicant / Respondent only.*  *For cases filed in eLitigation, other than cases with OAD prefix, you must additionally file a Request to Remove a Party from an action.*  *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.* |
| Signature of party giving Notice or counsel for that party | |  |
|  | |  |  |  | | --- | --- | --- | |  | Enter party type here. | | |  | Counsel for the | Enter party type here. | |  | Enter name of law firm and lawyer here. | |  |  |  | | --- | --- | | Date: | Enter date here. | |  |
| Signature of party giving consent or counsel for that party | |  |
|  | I consent to this Notice   |  |  |  | | --- | --- | --- | |  | Enter party type here. | | |  | Counsel for the | Enter party type here. | |  | Enter name of law firm and lawyer here. | |  |  |  | | --- | --- | | Date: | Enter date here. | |  |