## CIVAPP11

Legal Aid	For Official Use Only
Agency	Tag No:/ /
Is this case funded un	der an Exceptional Case Funding determination? Yes No
Your client's o	letails
Our reference numb	er:
Title:First na	me:Surname:
(il different)	Date of birth: / /
address:	Postcode:
· · ·	Postcode:
Name of organisation Phone: E Mail: Name of authorised 4 The authorised litig pay for any work d practising certificat Your case re Contact name for end	ator instructed must have a valid practising certificate. The LAA will not one during the period in which the authorised litigator does not have a e. ference:
- I do not in - no other be made - I understa - Do not us Do not us	

Withdrawal reasons (continued)		
c	Work authorised under the certificate has been completed and/ /	
	I enclose a copy of the final order/details of any settlement.	
	Money and/or property has been recovered or preserved to which the statutory charge may apply. I attach a report on form CIVADMIN 1.	
	$\Box$ An undisputed sum which increases the client's disposable capital to over £3,000 has been received.	
🗌 d	The client died on: ////	
e	The client has failed to provide instructions.	
🗌 f	The client is the subject of a bankruptcy order made on: / / /	
g	The client has required the proceedings to be conducted unreasonably so as to incur an unjustifiable expense to the fund. $4$ If the client agrees to the withdrawal, use box b above.	
🗌 h	One or more of the relevant criteria in the Civil Legal Aid (Merits Criteria) Regulations 2012 or the Civil Legal Aid (Procedure) Regulations 2012 is/are no longer being met.	
[] i	The client no longer qualifies for the services authorised by the certificate in accordance with regulations made under S.21 Legal Aid Sentencing and Punishment of Offenders Act 2012 (financial eligibility).	
[ ]	An order has been made under S.42 Senior Court Act 1981 ir S.33 of the Employment Tribunals Act 1990 (restriction of vexation proceedings) in relation to the client.	
Where you are requesting withdrawal under grounds <b>e</b> to <b>j</b> above, please provide further information below. If there is an unfavourable counsel opinion or experts report, please provide copies.		
·		
Certification		
I certify that the information provided above is correct		
Signed: Date:/ /		
Name	:	