



**Legal Aid Agency**

# Application for prior authority/change to cost limitation (where applicable)

For Official Use Only

Tag No: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Is this case funded under an Exceptional Case Funding determination?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you require a costs extension?	<input type="checkbox"/>	<input type="checkbox"/>

This form can be used for more than one expert.

Please confirm if application is urgent: Yes  No

Please confirm if application relates to: Mental Health  Very High Cost Case

Clinical Negligence  Immigration and asylum  Special Cases  Civil/Family/Care

Please tick why you require prior authority:

Exceptional

Codified Rate but unusual or unusually large (i.e. number of hours)

No Rates set in the Schedule and unusual or unusually large

## Your client's details

Our reference number: \_\_\_\_\_

Title: \_\_\_\_\_ Initials: \_\_\_\_\_ Surname: \_\_\_\_\_

Surname at birth: \_\_\_\_\_ Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(if different/if known)

Current address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Where this is a joint instruction of an expert and you are the lead solicitor please list all other parties to the proceeding and the apportioned percentage share of the experts costs (if a party is not responsible for a share of the expert costs please still list and enter 0% as their share).

Client name	Solicitor	Certificate ref	Apportioned (%)

## Provider details

Account number: \_\_\_\_\_ Solicitor's Reference: \_\_\_\_\_

Name of organisation: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E Mail: \_\_\_\_\_

Name of authorised litigator: \_\_\_\_\_

Contact name for enquiries: \_\_\_\_\_

4 The authorised litigator instructed must have a valid practising certificate. The LAA will not pay for any work done during the period in which the authorised litigator does not have a practising certificate.

## Type of Case

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Clinical negligence     | <input type="checkbox"/> Debt                              | <input type="checkbox"/> Community care                    |
| <input type="checkbox"/> Housing                 | <input type="checkbox"/> Education                         | <input type="checkbox"/> Other public law                  |
| <input type="checkbox"/> Immigration and asylum  | <input type="checkbox"/> Crime/Civil (JR or habeas corpus) | <input type="checkbox"/> Claims Against Public Authorities |
| <input type="checkbox"/> Mental health           | <input type="checkbox"/> Family public law                 |  |
| <input type="checkbox"/> Tribunal representation | <input type="checkbox"/> Court of Protection               | <input type="checkbox"/> Welfare benefits                  |
| <input type="checkbox"/> Family private law      | <input type="checkbox"/> Discrimination                    | <input type="checkbox"/> Other                             |

If funding was granted on or after 1 April 2013, is the case of a type not normally funded under the provisions of Schedule 1 of the Legal Aid Sentencing and Punishment of Offenders Act 2012?

Are the circumstances under which exceptional case funding was originally granted for this matter still relevant to the application for amendment? Yes  No

If funding was granted under the Asylum Seeker exemption to the residence test, does your client still meet the exemption requirements? Yes  No

## Details of Case

Name of Court: \_\_\_\_\_ Court Case Number: \_\_\_\_\_

Date of next hearing: \_\_\_\_/\_\_\_\_/\_\_\_\_

When is the expert's report due (if known)? \_\_\_\_\_

Why is it urgent? \_\_\_\_\_

What stage has been reached in the case?:

## Request

4 You will need to establish that the steps are necessary for the proper conduct of the proceedings and that the amount to be incurred is reasonable. You must also provide a sufficient breakdown including hourly rates of the costs to be incurred and the work to be done. You will need to identify how the costs are to be shared with other parties. No costs or expenses relating to the residential assessment of a child or costs of treatment, therapy or training will be included in any authority or met from legal aid.

4 What is the name and registered address of the expert you wish to employ? The registered address should be the one closest to the solicitor's address if the expert works from more than one address.

**NB. It is the location of the expert that determines whether London or non-London rates or fees apply. London rates will apply where the expert is based within a London Borough.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Expert type: \_\_\_\_\_

What work is the expert to do and why is it necessary?

Please only complete the relevant section(s): (please tick)

Prior authority request(s) to instruct experts at the codified rates or where an expert is not listed in the Schedule to the order please complete Section 1 only in full.

For prior authority request(s) to instruct experts when the hourly rates exceed the codified rates please complete Sections 1 & 2 in full.

If these are proceedings involving a dispute about children, are you satisfied that the expert you wish to employ meets the Ministry of Justice standards for experts in England and Wales?

Yes  No

If you have answered 'Yes' please enclose a copy of the expert's CV and the expert's signed statement of truth. If the expert does not meet the standards please provide reasons why you wish to instruct them and why an expert who does meet the standards could not be instructed

### Please note:

For additional experts please submit a further copy of this page numbering it 3A, 3B, 3C as appropriate.

# Section 1

Please complete the information for the expert type being used.

Are any of the following costs apportioned? Yes  No

**If not explain the basis of why apportionment is not appropriate.**

**Please note that administration charges cannot be claimed.**

	The number of hours	Experts full hourly charge	Total before apportionment	Total after apportionment
<b>Reports</b>	_____	@£ _____	=£ _____	£ _____
<b>Meetings/Consultations /Assessment</b>	_____	@£ _____	=£ _____	£ _____
<b>Testing</b>	_____	@£ _____	=£ _____	£ _____
<b>Travel</b> Please note <u>maximum</u> rate payable is £40 per hour.	_____	@£ _____	=£ _____	£ _____
<b>Travel fares or mileage</b> Please note maximum rate payable is £0.45 per mile.	Mode of transport _____	number of miles @£ _____	=£ _____	£ _____
<b>Court Attendance (if applicable)</b>	_____	@£ _____	=£ _____	£ _____
<b>Total Authority Requested per party</b>				£ _____

If these are Children Act proceedings where the permission of the court is required, has permission been obtained?

Yes  No

Please enclose the relevant order.

In public law Children Act proceedings explain why the local authority is not bearing the full costs of the expenditure proposed.

How many alternative quotes have been obtained? \_\_\_\_ (Please supply copies)

Why have you chosen the quote you have?

## Please note:

For additional experts please submit a further copy of this page numbering it 4A, 4B, 4C as appropriate.

## Section 2

### Exceptional Circumstances

4 This page must be completed if you are seeking authority above the codified rate.

(a) The complexity of the material is such that an expert with a high level of seniority is required, please provide full details of why you consider this is appropriate and supply evidence of work to be undertaken by this expert.

(b) The material is of such a specialised and unusual nature that only very few experts are available to provide the necessary evidence, please provide full details of why you consider this is appropriate and supply evidence of work to be undertaken by this expert.

**Please note:**

For additional experts please submit a further copy of this page numbering it 5A, 5B, 5C as appropriate.

## Section 2 continued

Are you requesting change to costs limitation? Yes  No

If you require a scope enhancement and associated costs increase a separate CIVAPP8 should be completed and submitted to the relevant Legal Aid Agency regional office.

4 Estimate your likely costs for all work done in this case with legal aid (including other levels of help, but excluding private costs) at LAA rates, excluding VAT, including disbursements and counsels fees. Where known, legal aid costs incurred by a previous solicitor for the same client for this case should also be included in the estimate.

4 If your costs are likely to fall within standard fees then your estimate of costs should be based on this fee, not your hourly rates to date.

	To Date	Estimated Future Costs
Profit Costs:	£ _____	£ _____
Experts Costs:	£ _____	£ _____
Other disbursements:	£ _____	£ _____
Counsels fees:	£ _____	£ _____
<b>Total Costs:</b>	£ _____	£ _____

Please confirm the amount of the new cost limit required: £ \_\_\_\_\_

4 If your estimate of likely costs/disbursements meets the requirements in the Funding Code or Procedure Regulations for special case work, please attach a copy of the costed case plan and submit this application to the Special Cases Unit (or for family cases to the South Tyneside Office) direct.

Documents enclosed (tick all that apply)

Court Order  Quotes

Solicitor's Signature: .....

Solicitor's Name: .....

Date: ...../...../.....