

Application for an order to allow enforcement of a decision or an ACAS settlement (Form COT3) that does not require permission to proceed

If this is a conditional settlement, or the decision requires a court order to proceed, you must use form N322A - Application to enforce a decision or ACAS conditional settlement (Form COT3) that requires permission to proceed.

Name of court
Claim number (To be completed by the court)
Applicant
Respondent

The applicant applies to enforce a

decision

Dated / /

settlement

Dated / /

(If settlement, go to section 1 - Applicants details)

and for an order that the respondent pay the costs of this application.

What is the name of the Tribunal/ court that granted your award.

Give the reference number of your decision

Please give details of the legislation that allows you to enforce this decision

A copy of the decision or ACAS settlement (Form COT3) is attached.

1. Applicant's details

Name of applicant

Applicant's address

Postcode

Telephone no.

Ref.

Email address

Address for service (if different from opposite)

Postcode

2. Respondent's details

Name of respondent

Respondent's address

Postcode

continued over the page 

3. The amount now owing and the costs claimed

The amount of the decision/settlement (including costs)

£

If your legislation allows you to claim interest on the amount award please complete this section.
You must show details of your calculations.

[Interest on

£

from

□□/□□/□□□□

to

□□/□□/□□□□

at

□□ %

]

or

[As shown in the attached calculation]

£

sub-total

£

Solicitor's costs

£

Less amount paid

£

Total now owing

£

4. Declaration in ACAS matters

I certify that a declaration that this sum would not be recoverable against the respondent under general law of contract has not been made and that no such application is pending.

5. Statement of truth

Statement of Truth

I understand that proceedings for contempt of court may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

I believe that the facts stated in this application are true.

The Applicant believes that the facts stated in this application are true. **I am authorised** by the applicant to sign this statement.

Signature

Applicant

Litigation friend (where judgment creditor is a child or a patient)

Applicant's legal representative (as defined by CPR 2.3(1))

Date

Day

Month

Year

Full name

Name of applicant's legal representative's firm

If signing on behalf of firm or company give position or office held