



Legal Aid  
Agency

# Claim for Family Graduated Fee (Counsel)

For Official Use Only

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

Note: One claim form should be completed per counsel

## Your client's details

Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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

## Additional client details (multiple clients):

1. Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Our case reference number: \_\_\_\_\_

2. Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Our case reference number: \_\_\_\_\_

3. Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Our case reference number: \_\_\_\_\_

## Your details (counsel)

Counsel's name: \_\_\_\_\_

Account number:

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ DX address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact name for enquiries: \_\_\_\_\_ Tel no.: \_\_\_\_\_

**E-mail address for enquiries:** \_\_\_\_\_

Are you :  King's Counsel  Junior Counsel

Your case reference: \_\_\_\_\_

Instructed by: \_\_\_\_\_

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

## **Description of main issues in this case**

- 4 Please include name of court, nature of application(s) and where applicable hearing listing times and time spent at hearing (please give starting and finishing times if not endorsed on the brief)
- 4 If you are claiming for travel or overnight accommodation, please provide justification.

# Schedule of payments claimed

- 4 Please see Guidance for CIVClaim 5 for completion.
- 4 Complete in chronological order. All figures are net of VAT.
- 4 Where the claim relates to more than one set of proceedings please photocopy and complete this page once to show work done per set of proceedings.

Category of case (please tick one only):  1 Family injunctions  2 Public law children  
 3 Private law children  4 Ancillary relief and all other family proceedings

Where a set of proceedings covers more than one category of work, counsel must choose which single category of work to be paid under.

| Function   | Date of instruction | Function dates | Bolt on Payments '2 | Prep but no hearing '3 | No. of hearing units '4 | Rates for units '5<br>£ : p | Base fee total cost '6<br>£ : p | Settlement supplement '7<br>£ : p | No. of SIPS per function '8 | Cost of SIPS '9<br>£ : p | Advocate bundle 176-350 pages '10<br>£ : p | Advocate bundle 351-700 pages '10<br>£ : p | Special Prep time (hrs:mins) '11 | Special Prep cost<br>£ : p | High Court Payment '12 | Sub Total per Function<br>£ : p |
|------------|---------------------|----------------|---------------------|------------------------|-------------------------|-----------------------------|---------------------------------|-----------------------------------|-----------------------------|--------------------------|--|--|----------------------------------|----------------------------|------------------------|---------------------------------|
|            |                     |                |                     |                        |                         |                             |                                 |                                   |                             |                          |  |  |                                  |                            |                        |                                 |
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|            |                     |                |                     |                        |                         |                             |                                 |                                   |                             |                          |  |  |                                  |                            |                        |                                 |
| Sub totals |                     |                |                     |                        |                         |                             |                                 |                                   |                             |                          |  |  |                                  |                            |                        |                                 |

A                  B                                  C                  D                  E                                  F                  G

Total of A + B + C + either D or E x G + F = £          :          p          H

See CIVClaim 5 Guidance for details on how to complete this schedule.

# Incidental items

4 Please see Guidance for CIVClaim 5 for completion.

4 Please photocopy, complete and attach additional copies of this page as required

| Audio/Visual tapes and discs             |     |     |     |     |     |     |     | Total cost |   |
|--|-----|-----|-----|-----|-----|-----|-----|------------|---|
| No. of tapes:                            |     |     |     |     |     |     |     |            | I |
| Running time (hrs:mins):                 | :   |     |     |     |     |     |     | :          |   |
| Travel time                              |     |     |     |     |     |     |     | J          |   |
| Dates:                                   | / / | / / | / / | / / | / / | / / | / / |            |   |
| Time each date (hrs:mins):               | :   | :   | :   | :   | :   | :   | :   | :          |   |
| Hotel Expenses                           |     |     |     |     |     |     |     | K          |   |
| Dates:                                   | / / | / / | / / | / / | / / | / / | / / |            |   |
| Dates:                                   | / / | / / | / / | / / | / / | / / | / / |            |   |
| Total no. of nights claimed:             |     |     |     |     |     |     |     | :          |   |
| Travel Expenses                          |     |     |     |     |     |     |     | L          |   |
| Dates:                                   | / / | / / | / / | / / | / / | / / | / / |            |   |
| Mileage per date:                        |     |     |     |     |     |     |     |            |   |
| Cost of 2nd class travel per date:       | :   | :   | :   | :   | :   | :   | :   | :          |   |
| <b>Total claimed (I + J + K + L = M)</b> |     |     |     |     |     |     |     | :          | M |

|                     |   |   |   |
|---------------------|---|---|---|
| Total of H + M =    | £ | : | p |
| Total VAT:          | £ | : | p |
| <b>Grand total:</b> | £ | : | p |

## Preparation for hearing where no hearing takes place or counsel is prevented from attending

4 Please provide full details in support of your claim, including reasons why you were not able to represent your client at the hearing or the hearing did not take place:

## Special preparation: cases where the LAA assesses payment (ie non hearing functions)

### (a) Advocate bundle payment

Did the advocate bundle exceed 700 pages?

Yes       No      If yes, please state total number of pages \_\_\_\_\_

How many hours of preparation do you seek payment for? \_\_\_\_\_

### (b) Complexity

Did the proceedings involve exceptionally complex issues of law or fact?

Yes       No

If yes, please supply details:

Please state the number of hours you would normally have worked on this type of case, if it did not involve exceptionally complex issues of law or fact \_\_\_\_\_

How many additional hours of preparation do you seek payment for? \_\_\_\_\_

### (c) Public Law

In public law proceedings, was the main hearing split so that a period of at least 4 months elapsed between its commencement and the time at which it resumed?

Yes       No

If yes please state duration of time elapsed: \_\_\_\_\_

Please state the number of hours you would normally have spent on preparation, had the main hearing not been split \_\_\_\_\_

How many additional hours of preparation do you seek payment for? \_\_\_\_\_

## Settlement supplement claimed for Function 5

How many days was the main hearing listed for? \_\_\_\_\_ On what day did the case settle? \_\_\_\_\_

4 No settlement supplement is payable in the primary hearing unit of Function F5 where the proceedings have been listed for less than two days, or any secondary hearing unit.

### Cases in the Magistrates Court/before lay justice or justices' clerk

Was authority obtained from the LAA to instruct/brief you in this case?  Yes  No

If you answered no to this question, please give your reasons for acting in this case and set out the times spent in the table below (which will be paid to you at the solicitors rates of remuneration under the Civil Legal Aid (Remuneration) Regulations 2013.

| Function     | Date<br>dd/mm/yy | Prep<br>Time | Prep<br>Cost | Travel<br>Time | Travel<br>Cost | Waiting<br>Time | Waiting<br>Cost | Conf/Neg<br>Time | Conf/Neg<br>Cost | Hearing<br>Time | Hearing<br>Cost | Sub<br>Total |
|--------------|------------------|--------------|--------------|----------------|----------------|-----------------|-----------------|------------------|------------------|-----------------|-----------------|--------------|
|              |                  |              |              |                |                |                 |                 |                  |                  |                 |                 |              |
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|              |                  |              |              |                |                |                 |                 |                  |                  |                 |                 |              |
|              |                  |              |              |                |                |                 |                 |                  |                  |                 |                 |              |
| Sub<br>Total |                  |              |              |                |                |                 |                 |                  |                  |                 |                 |              |

## Special Issue Payments

4 Please see Guidance for CIVClaim 5 for completion.

4 Please identify which of the possible SIPS listed below are claimed per function payment in this table:

| Function payment claimed<br>(insert number F1 - F5) | Hearing date (functions 2, 3<br>and 5 only) | SIP claimed (please insert<br>relevant numbers) |
|---|---|---|
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |

In cases where the Agency assesses payment (i.e. no hearing has taken place), please supply details as to how the special issues were relevant to the issues before the court.

## Enclosures

You should submit the following

- Form of instruction from instructing solicitor confirming the work counsel should undertake (copy brief or instructions endorsed by counsel) (for every claim)
- Counsel's note of the main conference (when claiming F4 payment only)
- Judicial certification/record as required of: certificate for counsel, SIPS (if any), amount of special preparation payable and advocate bundle payments (when claiming F2, F3, F5 payments only)
- Receipts for travel/hotel expenses if over £20.00
- Other, give details \_\_\_\_\_
- Schedule of hours spent in preparation (SPF)

## Certification

I certify that the information I have provided is correct and the work carried out by me has not been and will not be the subject of any other claim by me for payment from the Legal Aid Agency. I understand that if information given by me is incorrect or misleading, payment may be recouped and other steps taken against me.

Signed: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_

I understand a false declaration may lead to prosecution.