N244 **Application notice**

For help in completing this form please read the notes for guidance form N244Notes.

Find out how HM Courts and Tribunals Service uses personal information you give them when you fill in a form: https://www.gov.uk/ government/ organisations/hm-courts-and- tribunals-service/about/personal-information- charter

Name of Court	Claim no.	
Fee account	Help with Fees -	
no.	Ref. no.	
(if applicable)	(if applicable)	
	HWF	
Warrant no.		
(if applicable)		
Claimnant's name (including. ref)		
Defendant's name (including. ref)		
Date		

- 1. What is your name or, if you are a legal representative, the name of your firm?
- Are you a Claimant Defendant Legal Representative
 Other (please specify)

If you are a legal representative whom do you represent?

3. What order are you asking the court to make and why?

4. Have you attached a draft of the order you are applying for?

No Yes

5. How do you want to have this application dealt with?

without a at a hearing hearing

at a remote hearing

6. How long do you think the hearing will last? Is this time estimate agreed

Hours **Minutes**

by all parties?

No Yes

- 7. Give details of any fixed trial date or period
- 8. What level of Judge does your hearing need?
- 9. Who should be served with this application?
- 9a. Please give the service address, (other than details of the claimant or defendant) of any party named in question 9.

	the attached witness statement
	the statement of case
	the evidence set out in the box below
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if necessa	ary, please continue on a separate sheet.

10. What information will you be relying on, in support of your

11. Do you believe you, or a witness who will give evidence on your behalf, are vulnerable in any way which the court needs to consider?

Yes. Please explain in what way you or the witness are vulnerable and what steps, support or adjustments you wish the court and the judge to consider.

No

Statement of Truth

I understand that proceedings for contempt of court may be brought against a person 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 section 10 (and any continuation sheets) are true.

The applicant believes that the facts stated in section 10 (and any continuation sheets) are true. I am authorised by the applicant to sign this statement.

Signature

Applicant

Litigation friend (where applicant is a child or a Protected Party)

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

Applicant's address to which documents should be sent.
Building and street
Second line of address
Town or city
County (optional)
Postcode
If applicable
Phone number
Fax phone number
DX number
Your Ref.
Email