## Application to enforce an aw Tri W

award of an Employment Tribunal and request a Writ of Control		Claim number (To be completed by the court)  Applicant  Respondent		
		Fee Account no.		
Please give details of the Employm under section 15 of the Employmen		Appeal Tribunal award you are seeking to enforce		
Name of the Tribunal				
Award number				
Date of award				
Please attach the original award t	o this application.			
1. Applicant's details		2. Respondent's details		
Name of applicant		Name of respondent		
Applicant's address		Respondent's address		
Postcode Ref.		Postcode		
Email address				
Address for service (if different from Postcode	above)			

3. The amount now owing and the costs claimed					
The amount of the award including costs the Tribunal	awarded by	£			
To claim interest on the award please com You must show details of your calculation					
[Interest on £	(as per the amou	unt above)			
from//	to/				
at %	]				
	or				
[As shown in the attached calculation]		£			
	sub-total	£			
Legal representative's costs		£			
Less amount paid		£			
	Total now owing	£			

## 4. Requests

I request that the award be filed with the county court for enforcement and that an order be made for its enforcement in the High Court by Writ of Control.

I intend to enforce the award by execution against goods in the High Court and require a certificate for

that purpose.

## 5. 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 <b>believe</b> that the facts stated in this application are true and there are no applications or other procedures pending.					
The Applicant believes that the facts stated in this application are true and there are no applications or other procedures pending. 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					

6. To be certified by the court (for court use only)				
I certify that the award, the original of which is attached, has been filed at the court and order enforcement in the High Court by Writ of Control.  Dated  An Officer of the Court				

## **Please Note:**

The award has been sent to the High Court for enforcement by Writ of Control only.

The award **has not been transferred** to the High Court. Applications for other methods of enforcement or ancillary applications **must** be made to the County Court office in which the award was filed, unless it has since been transferred to a different office, in which case it must be made to that office.

7. Request for Writ of Control			
In the High Court of Justice King's Bench Division	Seal a Writ of Control directed to:		
(Sent from the County Court at)  Certificate dated the day of)	an enforcement officer authorised to enforce writs of execution from the High Court.		
High Court Enforcement Number	for:  A. the sum of:		
County Court Claim Number	(b) costs and interest	£ £	
Address of (Debtor)	(if any)		
	B. and interest thereon at % per annum from the date of transfer and costs of execution.  Signed		
	Address for service	lress for service	
	Date ////////////////////////////////////	]	