



Name of court

Case number/Serial number

Name of child

Application under Part 19 of the Family Procedure Rules 2010

Applicant

Date issued

Day

Month

Year

Fee charged/Remission ID

Respondent(s)

1. If you are acting by solicitor in these proceedings, your solicitor's name and address:

1.1 Name of solicitor

1.2 Name of firm

1.3 Address

First line of address

Second line of address

Town or city

County (optional)

Postcode

| | | | | | |

1.4 Phone number

1.4 DX number

1.6 Email

1.7 Fee account number

2. Does your application include any issues under the Human Rights Act 1998?

Yes

No

3. Details of application

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 form and any continuation sheets are true.

The applicant believes that the facts stated in this form and any continuation sheets are true. **I am authorised** by the applicant to sign this statement.

Signature

Applicant

Applicant's legal representative (as defined by FPR 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