

EX244

Application notice

(Pursuant to the Extradition Act 2003)

Application notices must comply with Part 50 of Criminal Procedure Rules 2020 and Part 12 of the Criminal Practice Directions 2023 and must be served on all parties

Name of court

King's Bench Division
Administrative Court

Claim number

Warrant number

Name of applicant/appellant
(including any reference)

Name of respondent
(including any reference)

Date

Day

Month

Year

1. This application notice is filed on behalf of
Name

Who, in the appeal, is the

- applicant/appellant
 respondent
 other (please specify)

2. Are you (the person completing this form) the

- applicant
 legal representative
 other (please specify)

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?

Yes

No

5. Is the application urgent?

Yes. A decision is required within 7 days.

No

If Yes, please state the reason(s) for urgency

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

at a hearing

without a hearing

7. How long do you think the hearing will last?

Hours

Minutes

8. Is this time estimate agreed by all parties?

Yes

No

9. Give details of any fixed hearing date or period.

10. State the information relied on, in support of the application?

- the attached witness statement
- the statement of case
- the evidence set out in the box below

If necessary, please continue on a separate sheet.

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

Signature

- Applicant
- Litigation friend
- Applicant's legal representative

Date

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Full name

Name of legal representative's firm (if applicable)

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

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If applicable

Phone number

DX number

Your Ref.

Email