

# Pre-trial checklist

## Directors disqualification

To be completed by, or on behalf of,

who is [1<sup>st</sup>][2<sup>nd</sup>][3<sup>rd</sup>][ ] [Claimant][Defendant] in this claim

Name of company to which claim relates

In the	
Claim no.	
Last date for filing with court office	
Date(s) fixed for trial or trial period	
Claimant	
Defendant	

This form must be **completed** and **returned** to the court no later than the date given above. If not, your evidence may be struck out or some other sanction imposed.

If the claim has settled, or settles before the trial date, you must let the court know immediately.

**Legal representatives only:** You must **attach** estimates of costs incurred to date, and of your likely overall costs. In substantial cases, these should be provided in compliance with CPR Part 43.

You must also **attach** a proposed timetable for the trial itself.

## A Confirmation of compliance with directions

1. I confirm that I have complied with those directions already given which require action by me.

Yes  No

If you are unable to give confirmation, state which directions you have still to comply with and the date by which this will be done.

Directions	Date

2. I believe that additional directions are necessary before the trial takes place.

Yes  No

If Yes, you should attach an application and a draft order.

*Include in your application all directions needed to enable the claim **to be tried on the date, or within the trial period, already fixed**. These should include any issues relating to experts and their evidence, and any orders needed in respect of directions still requiring action by any other party.*

3. Have you agreed the additional directions you are seeking with the other party(ies)?

Yes  No

## B Witnesses

1. How many witnesses (including yourself) will be giving evidence on your behalf at the trial? (Do not include experts - see Section C)

Continued over 

## Witnesses continued

2. If the trial date is not yet fixed, are there any days within the trial period you or your witnesses would wish to avoid if possible? *(Do not include experts - see Section C)*

Please give details

Name of witness	Dates to be avoided, if possible	Reason

Please specify any special facilities or arrangements needed at court for the party or any witness (e.g. witness with a disability).

3. Will you be providing an interpreter for any of your witnesses?  Yes  No

## C Experts

*You are reminded that you may not use an expert's report or have your expert give oral evidence unless the court has given permission. If you do not have permission, you must make an application (see section A2 above)*

1. Please give the information requested for your expert(s)

Name	Field of expertise	Joint expert?	Is report agreed?	Has permission been given for oral evidence?
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Has there been discussion between experts?  Yes  No

3. Have the experts signed a joint statement?  Yes  No

4. If your expert is giving oral evidence and the trial date is not yet fixed, is there any day within the trial period which the expert would wish to avoid, if possible?  Yes  No

If Yes, please give details

Name	Dates to be avoided, if possible	Reason

## D Legal representation

1. Who will be presenting your case at the trial?  You  Solicitor  Counsel
2. If the trial date is not yet fixed, is there any day within the trial period that the person presenting your case would wish to avoid, if possible?  Yes  No

If Yes, please give details

Name	Dates to be avoided, if possible	Reason

## E Summary disposal under the Carecraft procedure or by disqualification undertaking

1. Have you considered the possibility of resolving this case by a disqualification undertaking or under the procedure adopted in *Re Carecraft Construction Co. Ltd* [1994] 1 WLR 172 ('a Carecraft application'). If not this should be considered as soon as possible.  Yes  No
2. Please state whether the case should be listed for a Carecraft disposal or full trial at a time and date to be fixed.  Carecraft  Full trial
3. If such a Carecraft application is to be made, the agreed written statement of facts must be submitted by the claimant as set out in the Practice Direction relating to disqualification proceedings and delivered to the court not later than 2 working days before the date upon which it is intended to make the application and in any event as soon as possible.

## F The trial

1. Has the estimate of the time needed for trial changed?  Yes  No
- If Yes, say how long you estimate the whole trial will take, including both parties' cross-examination and closing arguments  days  hours  minutes
2. If different from original estimate have you agreed with the other party(ies) that this is now the **total** time needed?  Yes  No
3. Is the timetable for trial you have attached agreed with the other party(ies)?  Yes  No

## G Document and fee checklist

*Tick as appropriate*

I attach to this questionnaire -

- |   |   |
|---|---|
| <input type="checkbox"/> An application and fee for additional directions | <input type="checkbox"/> A proposed timetable for trial |
| <input type="checkbox"/> A draft order                                    | <input type="checkbox"/> An estimate of costs           |
| <input type="checkbox"/> Listing fee                                      |   |

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Signed	Please enter your [firm's] name, reference number and full postal address including (if appropriate) details of DX, fax or e-mail	
[Counsel][Solicitor][for the][1 <sup>st</sup> ][2 <sup>nd</sup> ][3 <sup>rd</sup> ][ ] [Claimant][Defendant]		
Date	Postcode	
Tel. no.	DX no.	E-mail
Fax no.	Ref. no.	