OFFICIAL CRM7

Please tick if you are appealing

provisional assessment



Non-Standard Fee Contract Work Assessment Form

This form must be submitted to your processing office

Please complete in block capitals

Summary of Claim		
Surname and Initial:		
UFN:		
Provider number:		
MAAT number:		
Representation Order date:/_/		
Stage Reached:	For office use only	
Outcome Code:	Profit Costs Allowed:	£
Matter Type:	Disbursements Allowed:	£
Equal Opportunities Monitoring:	Travel Allowed:	£
Profit Costs: £	Waiting Allowed:	£
Disbursements: £	Counsel's Account Number:	
Travel: £		
Waiting: £ Date class of work closed:/ /	Counsel's Fees Claimed (Net)	: £
	Counsel's VAT Claimed:	£
Number of defendants represented:	Counsel's Fees Allowed (Net):	£
Number of court attendances:	Counsel's VAT Allowed :	£
Court Identifier:		
Youth Court: Yes No		

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Address:	
	Postcode:
	Solicitor's reference:
l elephone number:	Email address:
Case details	
Main Offence:	Date offence committed:/ /
Was counsel instructed?	Assigned Yes No
	Unassigned (maximum fee principle applies)
Does this claim cover more 4 If yes and your costs are no	e than one defendant?
Was the defendant or any	co-defendant charged with any indictable only offence?
If so, please give the date and enclose the indictmen	
Were any wasted costs ord	ders made in this case?
•	
•	
4 If yes, please give detail	s on page 7.
4 If yes, please give detail Details of main offe Summary Only	s on page 7.
Were any wasted costs ord If yes, please give detail Details of main offe Summary Only Either Way	s on page 7.
4 If yes, please give detail Details of main offe Summary Only Either Way	s on page 7.
4 If yes, please give detail Details of main offe Summary Only	s on page 7.
A If yes, please give detail Details of main offe Summary Only Either Way Indictable Only	ence
4 If yes, please give detail Details of main offe Summary Only Either Way	ence
A If yes, please give detail Details of main offe Summary Only Either Way Indictable Only Prescribed Proces	ence
Proceedings for lo	ence
Proceedings for lo	ence edings ow-value shoplifting as defined in section 22A(3) of the Magistrates

ase outco	ome
	Guilty Plea
	Contested Trial
	Discontinuance
	Change of solicitor - insert date of change://
	Warrant Issued - insert date of issue://
	Other case disposal type:
ase categ	ory for magistrates' court matters (non - youth)
J	ory for magistrates court matters (non - youth)
	Category 1A
	Category 1A Category 1B
	Category 1A
For more info	Category 1A Category 1B Category 2 ormation on the category definitions please refer to the Category able in paragraph 10.90 Crime Contract 2022
For more info	Category 1B Category 2 commation on the category definitions please refer to the Category able in paragraph 10.90 Crime Contract 2022 ory for youth matters
For more info	Category 1A Category 1B Category 2 cormation on the category definitions please refer to the Category able in paragraph 10.90 Crime Contract 2022 ory for youth matters Category 1A
For more info	Category 1B Category 2 commation on the category definitions please refer to the Category able in paragraph 10.90 Crime Contract 2022 ory for youth matters
For more info	Category 1A Category 1B Category 2 commation on the category definitions please refer to the Category able in paragraph 10.90 Crime Contract 2022 ory for youth matters Category 1A Category 1B

Reason(s) for Non-Standard Fee Claim				
4 Tell us why you are claiming a non-standard fee by ticking the box(es) that apply in this case				
Core costs exceed higher limit				
Enhanced rates claimed				
Counsel assigned				
Representation Order withdrawn on/				
Extradition				
s.6(1) Committal (pre CPIA 1996)				
Other4 give details				
Claim details				
1. Where applicable, give the approximate number of pages for:				
prosecution evidence defence statements				
$oldsymbol{4}$ i.e. total number of pages of defence evidence including any statements by the defendant and defence witnesses				
2. Number of defence witnesses				
3. Does this bill represent a supplemental claim? 4 If yes, attach a copy of the previous claims				
4. Was any preparation time spent watching/listening to taped Yes No evidence?				
4 If yes, tell us the total running time of the tape(s) (hrs:min).				
5. Has the case been remitted back to the Magistrates by the Yes No Crown Court?				
If yes, please provide a copy of any related Crown Court claim and any notice of provisional assessment				
Pre Order work				
Are you claiming for any work which precedes the date of grant shown on the order? Yes No				
If yes, please give the date on which the application was received by the court:				

Schedule of time spent 4 Complete in chronological order.

	Fee arner's initials	Date dd mm yy	Travel hrs mins	Waiting hrs mins	Attendances hrs mins	Preparation hrs mins	Advocacy hrs mins	Hearing type codes(s)	Code(s) for person(s) attended upon
If	enhance	earner time	%	%	%	%	%		complete row Rows 3,4 &
Ti If	aimed % me enhance	6 uplift ed rates	%	%	%		%	may be used for internal purposes w applying / calculatin	
C	aimed % osts otal cost	£:p						are clain enhance specific	ement only or items of work
					Α	В	С	appropri	ighlight the ate lines on dule above.

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Claim for costs

	Number	Costs £:p	
Letters written			
If enhanced rates claimed % uplift			
Total letters and costs			D
Telephone calls			
If enhanced rates claimed % uplift			
Total calls and costs			E
Solicitor's core costs (A+B+C+D+E)			
Disbursements		£ : p	Details (if car state mileage)
Travel (solicitor)		£:p	Details (if car state mileage)
VAT on travel			_
Disbursements subject to \	/AT		-
VAT			
Disbursements not subject	to VAT		
TOTAL DISBURSEMENTS	S		-
	I.		•
Is it a designated area?		Yes	☐ No
	aim the 'De	signated Are	t which the work is carried out a Standard Fees' or the 'Undesignated rime Contract 2022).

Relevant case information
Information given here may expedite payment. Please give details of any relevant factors in support of time spent on the case and details in support of a claim for enhanced rates. In addition, where relevant, please record when and why a number of linked cases are billed as one fee, or a number of linked cases are billed as separate fees.
If this claim is being submitted more than 2 months after the conclusion of the proceedings
If this claim is being submitted more than 3 months after the conclusion of the proceedings please provide details of the circumstances.
Solicitor's certification
I certify, on behalf of the payee, that the information provided is correct. This work has not been and will not be the subject of any other claim for remuneration from criminal legal aid.
Signed: Date:/ Date:/
Name:

Notice of application for review of assessment of costs 4 Please complete in block capitals			
Provider Number:			
I wish to apply for a review against the assessment of my costs			
Signed: Date:/			
Name:			
Reasons for review			
Please give details below of your objections to the assessment of your costs. Please return your file of papers with this review notice, so that the Independent Costs Assessor can consider it at the review hearing, should it be necessary.			
4 continue on a separate sheet if necessary			

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