



Legal Aid  
Agency

# Application for amendment or prior authority in civil cases

For Official Use Only

Tag No: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Urgent? ☐ Yes ☐ No If yes, please explain why on page 4.  
Granted under delegated functions? ☐ Yes ☐ No

Is this case funded under an Exceptional Case Funding determination?

Yes ☐ No ☐

Are the circumstances under which exceptional case funding was originally granted for this matter still relevant to the application for amendment?

☐ Yes ☐ No

**Please note - if you are making an ECF application you do not have delegated functions.**

## Your client's details

Our reference number: \_\_\_\_\_

Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Surname at birth: \_\_\_\_\_ Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(if different)

Current address: \_\_\_\_\_  
Postcode: \_\_\_\_\_

## Provider details

Account number:       Roll number:

Name of organisation: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E Mail: \_\_\_\_\_

Name of solicitor or Fellow of the Institute of Legal Executives instructed: \_\_\_\_\_

**4** The solicitor or Fellow instructed must have a valid practising certificate. The LAA will not pay for any work done during the period in which the acting solicitor does not have a practising certificate.

Your case ref: \_\_\_\_\_ Contact name for enquiries: \_\_\_\_\_

## Type of application(s)

- |   |  |
|---|--|
| <input type="checkbox"/> A change to the proceeding(s)    | <input type="checkbox"/> A change to the other party's details |
| <input type="checkbox"/> A change to the scope limitation | <input type="checkbox"/> Prior authority to incur expenditure  |
| <input type="checkbox"/> A change to the costs limitation | <input type="checkbox"/> Authority to instruct counsel         |
| <input type="checkbox"/> A change of solicitor            |  |

Form of Civil Legal Service:

- ☐ Change from family help (higher) to legal representation (family only)
- ☐ Change from investigative representation to full representation (civil non-family)

## Type of case

4 Please tick the contract category relevant to this case and see our website for where to send your application.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Clinical Negligence   | <input type="checkbox"/> Community Care                 | <input type="checkbox"/> Housing                                |
| <input type="checkbox"/> Debt  | <input type="checkbox"/> Other Public Law               | <input type="checkbox"/> Immigration and Asylum                 |
| <input type="checkbox"/> Education   | <input type="checkbox"/> Actions against the police etc | <input type="checkbox"/> Mental Health                          |
| <input type="checkbox"/> Discrimination  | <input type="checkbox"/> Welfare Benefits               | <input type="checkbox"/> Family (including public law children) |
| <input type="checkbox"/> Crime/Civil (judicial review or habeas corpus arising out of a criminal matter or proceedings under the Proceeds of Crime Act 2002). Note that London Office deals with all Proceeds of Crime Act applications. Please see our website for the address. |   |   |
| <input type="checkbox"/> Other proceedings (please state) _____  |   |   |

The case is of a type which is not listed in Schedule 1 of the Legal Aid Sentencing and Punishment of Offenders Act 2012 and is therefore outside of the scope of the normal legal aid scheme.

- ☐ I have completed, including specifying type of case, and signed an exceptional case funding form (ECF1) which accompanies this application.

Please state why the application falls under the Connected Matters rule (pursuant to paragraph 46 of Part 1 of Schedule 1.

## Primary proceedings

If this certificate was originally granted for proceedings for which specific criteria or procedural requirements must be satisfied and evidenced, including where the current amendment is to change the form of service from Family Help Higher to Legal Representation, please confirm that those criteria or requirements continue to be satisfied.

Yes ☐ No ☐

## **Current situation report and reasons for request:**

### **Amendment/authority requested:**

- 4 For a change of solicitor, give detailed reasons and (where the amendment is applied for because of client dissatisfaction) confirm that a complaint has been made using the firm's complaints procedure. Copy documents/correspondence regarding the complaint and its outcome must be attached. Please indicate why the client remains dissatisfied.

### **Please provide a summary of the work completed.**

- 4 If an increase in costs is being requested, please advise how existing limit has been reached and how much more is required.

### **Reasons for request:**

- 4 You must demonstrate how the criteria in the Civil Legal Aid (Merits Criteria) Regulations 2012 or Funding Code (as appropriate) are met.
- 4 Please note that information is also required regarding attempts at settlement and the need for a contested final hearing where the application is to increase scope beyond family help (higher). If an increase in costs is being requested, please provide a breakdown of how future costs have been calculated.

**Please attach CAFCASS report/counsel's Opinion/expert's report where applicable.**

## Current situation report and reasons for request continued

Have proceedings commenced?

☐ Yes

☐ No

If yes, give date of issue:      /      /

Has the case been allocated to a track under the Civil Procedure Rules?

☐ Fast

☐ Multi

☐ Small claims

☐ Not applicable

Please attach a copy of the allocation questionnaire.

Please state at what stage you believe the case will be concluded. If you consider the case will settle or otherwise be disposed of before trial, please state why.

## Family Proceedings which require evidence of Child Abuse or Domestic Abuse

4 If you are seeking to add a proceeding(s) to the certificate which requires evidence of Child Abuse or Domestic Abuse in order to satisfy the eligibility requirements, please complete the relevant section(s) below.

### Domestic Abuse

4 Legal aid is only available under paragraph 12 of Part 1 of Schedule 1 to the Legal Aid, Sentencing and Punishment of Offenders Act 2012 if the domestic abuse evidence requirements set out in regulation 33 of the Civil Legal Aid (Procedure) Regulations 2012 are satisfied.

Please state what evidence has been secured and is attached:

### Actions involving children

4 For most private law applications legal aid will only be available if evidence is provided of domestic abuse (see above) or if the child is at risk of abuse as set out in the Regulations 33 and 34 of the Civil Legal Aid (Procedure) Regulations.

4 For certain cases concerning the unlawful removal of children there are no prescribed evidential requirements but full details of the case must have been provided in the Reasons for Request section on page 3.

If the child is at risk of abuse as set out in the Regulation 34 of the Civil Legal Aid (Procedure) Regulations, please state what evidence has been secured and is attached:

## Exercise of Delegated Functions.

Tell us the date you amended the certificate:     /     /

If the amendment is to a certificate about emergency representation, tell us the date you sent the APP1/APP3 to us:     /     /

Tell us the wording code(s) you used and provide a brief description of the amendment, and if applicable, tell us the revised costs limitation:

Explain why an amendment to the emergency certificate was required:

Please attach CAFCASS report/counsel's opinion/expert's report where applicable.

### Merits

**4 There is no need to complete this section in Special Children Act 1989 cases or cases where prospects of success are not considered under the Merits Regulations**

Which of the following best describes the prospects of achieving a satisfactory outcome:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> <b>A</b> Very good (80% or more) | <input type="checkbox"/> <b>B</b> Good (60 - 80%) | <input type="checkbox"/> <b>C</b> Moderate (50-60%) |
| <input type="checkbox"/> <b>D</b> Marginal 45 - 50%       | <input type="checkbox"/> <b>E</b> Borderline      | <input type="checkbox"/> <b>F</b> Unclear           |
| <input type="checkbox"/> <b>G</b> Poor                    |   |   |

**4** If you have ticked box D, E or F please say what factors led you to make this assessment and why further legal aid should be granted.

## Estimate of costs

- 4 Estimate your likely costs for all work done in this case with legal aid (including other levels of help, but excluding private costs) at Legal Aid Agency (LAA) rates, excluding VAT, including disbursements and counsel's fees. Where known, legal aid costs incurred by a previous solicitor for the same client for this case should also be included in the estimate.
- 4 If your costs in a public law children matter are likely to fall within a standard fee then your estimate of costs should be based on this fee, not on your hourly rates to date.

Profit costs to date : £ \_\_\_\_\_

Experts costs to date: £ \_\_\_\_\_

Other disbursements to date: £ \_\_\_\_\_

Counsel's fees to date: £ \_\_\_\_\_

**Total costs to date:** £ \_\_\_\_\_

### Estimated future costs between now and settlement/disposal:

Future profit costs: £ \_\_\_\_\_

Future experts costs: £ \_\_\_\_\_

Future disbursements (Other): £ \_\_\_\_\_

Future counsel's fees: £ \_\_\_\_\_

**Total future costs:** £ \_\_\_\_\_

### Estimated total costs to trial:

Assuming the case proceeds to a contested final hearing please estimate the total costs of the case, including costs to date, up to and including that hearing (or to the next appeal stage if you are seeking legal aid for a final appeal).

Profit costs to trial : £ \_\_\_\_\_

Experts costs to trial : £ \_\_\_\_\_

Other disbursements to trial: £ \_\_\_\_\_

Counsel's fees to trial: £ \_\_\_\_\_

**Total costs up to and including trial:** £ \_\_\_\_\_

- 4 If your estimate of likely costs/disbursements meets the requirements set out in the Civil Legal Aid (Procedure) Regulations 2012 for special case work, please attach a copy of the up to date case plan and submit this application to the Special Cases Unit (or for family cases, to the South Tyneside Office) direct.

## Benefit to Client

### Quantifiable claims:

Please tell us the ratio of the value of the claim to the costs to disposal:

Value of claim:  Costs to disposal:  Ratio:  :

### Unquantifiable claims:

What benefit is your client hoping to obtain and why is this important to your client?

## Settlement Offers

Has the other side made any offer to settle the case? ☐ Yes ☐ No

If Yes, set out the terms of the offer and explain why legal aid should continue.

## Alternatives to litigation

4 Please complete this section if you are applying to extend the scope of the certificate or to change to a new form of service.

a) Has your client tried to resolve the dispute by the following or other methods?

i) negotiation ☐ Yes ☐ No

ii) mediation or other alternative dispute resolution ☐ Yes ☐ No

If yes, please provide details including outcome:

4 please provide copy correspondence where relevant

If no, please state why not:

## The other party

**4 There is no need to complete this section in Special Children Act 1989 cases**

Title: \_\_\_\_\_ Initials: \_\_\_\_\_ Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

If the other party has been given legal aid what is our reference number?

\_\_\_\_\_

If applicable, are you still satisfied that the other party has the means to pay and if so, why?

### Other clients

If you are acting for any other clients in respect of the same matter, please give our reference numbers and their full names, and explain how their position has been considered in relation to the current request(s):

## Ancillary Relief - Private Funding

**4** Please complete this section only if legal aid was provided under a certificate following an application made on or before 31 March 2013 and relates to financial provision in family proceedings and if you are applying to:

- (i) Extend the certificate from general family help or family help (higher) to legal representation; or
- (II) Extend the scope of a legal representation certificate to cover a contested hearing.

Please give details of any savings or other assets to which the client has access (whether or not in issue in the proceedings). Set out any reasons why these could not be used to fund legal costs.

Is your client paying a contribution under this or any other current certificate?

☐

Yes

☐

No

If yes, please specify the amount of the monthly contribution: £ \_\_\_\_\_

**Continued on page 9**



## Ancillary Relief - Private Funding continued

If there has been any recent change in your client's disposable income, please supply relevant updated means forms. Please tick as appropriate:

☐ Not applicable; no change in circumstances.

☐ Forms attached

What attempt has your client made to seek private funding to cover the remaining costs of the case? If such funding is not available or affordable for your client, please give details:

## New instructed solicitor's details

4 Complete if change of solicitor requested.

Account number:  Roll number:

Name of organisation: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E Mail: \_\_\_\_\_

Name of solicitor or Fellow of the Institute of Legal Executives instructed:

4 The solicitor or Fellow instructed must have a valid practicing certificate. The LAA will not pay for any work done during the period in which the acting solicitor does not have a practicing certificate.

4 Ensure that the certification on page 11 is signed where applicable.

Your case reference: \_\_\_\_\_

Contact name for enquiries: \_\_\_\_\_

## Prior authority request

- 4 Prior authority may be requested whenever the cost proposed is either unusual in nature or unusually large.
- 4 You will need to establish that the steps are necessary for the proper conduct of the proceedings and that the amount to be incurred is reasonable. You must also provide a sufficient breakdown including hourly rates of the costs to be incurred and the work to be done. You will need to identify how the costs are to be shared with other parties. No costs or expenses relating to the residential assessment of a child or costs of treatment, therapy or training will be included in any authority or met from legal aid.

Name of expert: \_\_\_\_\_

Company name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Expert Group: \_\_\_\_\_

Expert Type: \_\_\_\_\_

Why is the expenditure necessary/justified? (Please continue on a separate sheet if necessary)

Is this a single expert jointly instructed? ☐ Yes ☐ No If no, please state why.

\_\_\_\_\_

Please enclose a copy of the experts estimate giving a breakdown of the fees and the hourly rate.

If these are Children Act proceedings where the permission of court is required, has permission been obtained? Please enclose the relevant order or give full details.

☐ Yes

☐ No

In public law Children Act proceedings explain why the local authority is not bearing the full costs of the expenditure proposed.

Total expenditure: £ \_\_\_\_\_  
(before apportionment, if appropriate)

Preparation: £ \_\_\_\_\_

Cost of travel time £ \_\_\_\_\_

Court Attendance rate: £ \_\_\_\_\_  
(if expert to give evidence)

Maximum authority: £ \_\_\_\_\_  
(after apportionment, if appropriate)

Preparation - hourly rate: £ \_\_\_\_\_

Travel - hourly rate: £ \_\_\_\_\_

Other expert costs: £ \_\_\_\_\_

Explain the basis of apportionment or why apportionment is not appropriate

How many alternative quotes have been obtained? \_\_\_\_\_

What were the amounts quoted? \_\_\_\_\_

Why have you chosen the quote you have? \_\_\_\_\_

## Prior authority request continued

If these are proceedings involving a dispute about children, are you satisfied that the experts you wish to employ meet the Ministry of Justice standards for experts in England and Wales?

Yes ☐ No ☐

If you have answered 'Yes' please enclose a copy of the expert's CV and the expert's signed statement of truth. If the expert does not meet the standards please provide reasons why you wish to instruct them and why an expert who does meet the standards could not be instructed.

## Counsel's details

Authority is requested to: ☐ instruct ☐ brief

Type: ☐ leader alone ☐ leader plus junior ☐ two counsel ☐ junior (Magistrates' Court proceedings only)

## Enclosures

4 Do not send originals

☐ case plan (if total costs to final hearing are likely to exceed £25K) ☐ counsel's opinion ☐ witness statements

☐ pleadings ☐ allocation questionnaire ☐ photographs/plans

☐ other, give details: \_\_\_\_\_

## Certification

I certify that:

4 I have checked the form and any enclosures

4 I have explained to the client their obligations and contents of this application

4 I have provided as accurately as possible all the information requested on this form.

4 My office's Standard Civil Contract, Standard Civil Contract (Welfare Benefits) authorises Licensed Work in the proceedings to which this application relates (or I have a Standard Crime Contract and the application relates to Associated Civil Work).

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(A Solicitor or a Fellow of the Institute of Legal Executives)

Name: \_\_\_\_\_