

**Legal Aid
Agency****Application for extension of Upper Costs
Limit - pre October 2007 asylum
applications**

This form should be used when seeking an extension for hourly rates matters opened under paragraph 8.101(a) of the 2024 Standard Civil Contract (SCC), paragraph 8.101(a) of the 2018 SCC, paragraph 8.77 (a) of the 2013 SCC, paragraph 8.83 (a) of the 2010 SCC or under paragraph 11.2 (a) and (c) of the Unified Contract. This form must be submitted to the Liverpool Office in advance of the requested work being commenced. Email: cw3@justice.gov.uk

Provider Details

Name of Provider: _____ Account Number: _____

Provider address: _____

DX: _____ Telephone: _____ Email: _____

Client's Details

Client's Forename: _____ Surname: _____

Home office UCN: _____

Client's DoB: ____/____/____ LH Start Date: ____/____/____ CLR Start Date: ____/____/____

Client's Full Post Code: _____ Nationality: _____

Please complete below and endorse which of the following your application relates to:

Application	Costs Incurred	New Limit Requested
1. Legal Help	£	£
2. Legal Help Disbursements	£	£
3. First Tier Tribunal - CLR	£	£

1. Summary of case:

Briefly provide a summary of the case and highlight the main issues. Provide an estimate of the prospects of success (moderate or better, unclear or borderline, poor or very poor) and explain how the case meets the sufficient benefit or CLR merits test.

Continue on a further sheet if necessary

2. Give details of the work you have carried out to date, including all Counsel costs to date:

Provide in chronological order the main steps of the case completed together with the time and costs spent in undertaking each step.

Continue on a further sheet if necessary

3. Disbursements incurred to date:

Provide details of all disbursements (use Section 2 for Counsel fees).

(Please list by type of disbursement, i.e. interpreter, medical/expert report, travel).

Continue on a further sheet if necessary

4. Give details of your work for which further legal aid is required, any further Counsel costs and future disbursements required:

Continue on a further sheet if necessary

5. Requested Disbursements.

Give details of your work for which further legal aid is required:

Please note: legal help & CLR profit costs limits and the **disbursement limits are exclusive of VAT.**

For expert reports, please explain briefly:

- } How the report will help your client achieve a successful outcome with reference to the Home Office/Tribunal reasons for refusal/determination where applicable (a copy of the decision should be provided for reference).
- } Medical reports: whether your client has been diagnosed with a medical condition and whether you have obtained a report from their treating doctor and raised it with the Home Office.
- } Country Reports: whether you have considered the objective evidence and what specific aspects the expert will be asked to comment on.

Please complete the following sections where applicable:

Expert Reports

Type of Report	Name of expert	Hourly rate to be charged £ : p	Number of hours	Total requested £ : p

Interpreters.

Language: _____

Region: _____

Hourly rate for Attendance: £ :

Total for Attendance: £ :

Hourly rate for Travel: £ :

Total for Travel: £ :

Hourly rate for Waiting: £ :

Total for Waiting: £ :

Travel costs: £ :

Translation.

Total requested: £ :

Rate per 1000 words: £ :

Rate per A4 page: £ :

Total requested: £ :

Declaration:

I confirm that the details on this form are true to the best of my information and belief and that the work on this matter has been carried out in accordance with the contract specification and guidance.

Signed: _____ Print name: _____ Date: ____/____/____
Accredited Advisor

For Office Use Only

PA Ref: _____

Amount requested: £ _____

Amount allowed: £ _____

Decision made by: _____ Date: _____