

# Judicial Review

## Acknowledgment of Service

**This Acknowledgment of Service is filed on behalf of**

Name

who is the

☐ Defendant

☐ Interested party

Name of court

High Court of Justice  
Planning Court

Claim number

Name of claimant (including any reference)

Name of defendant

Interested parties

### Name and address of person to be served

Name

#### Address

Building and street

Second line of address

Town or city

County (optional)

Postcode

## Section A

Tick the appropriate box

- ☐ I intend to contest all of the claim  
– **complete sections B, C, D and F**
- ☐ I intend to contest part of the claim  
– **complete sections B, C, D and F**
- ☐ I do not intend to contest the claim  
– **complete section F**
- ☐ The defendant (interested party) is a court or tribunal and intends to make a submission  
– **complete sections B, C and F**
- ☐ The defendant (interested party) is a court or tribunal and does not intend to make a submission  
– **complete sections B and F**
- ☐ The applicant has indicated that this is a claim to which the Aarhus Convention applies  
– **complete sections E and F**
- ☐ The Defendant asks the Court to consider whether the outcome for the claimant would have been substantially different if the conduct complained of had not occurred (see s.31(3C) of the Senior Courts Act 1981)  
– **A summary of the grounds for that request must be set out in/accompany this Acknowledgment of Service**

**Note:** If the application seeks to judicially review the decision of a court or tribunal, the court or tribunal need only provide the Administrative Court with as much evidence as it can about the decision to help the Administrative Court perform its judicial function.

## Section B

**B1.** Insert the name and address of any person you consider should be added as an interested party.

1. Name

### Address

Building and street

Second line of address

Town or city

County (optional)

Postcode

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Phone number

Email (if you have one)

2. Name

**Address**

Building and street

Second line of address

Town or city

County (optional)

Postcode

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Phone number

Email (if you have one)

## Section C

Summary of grounds for contesting the claim. If you are contesting only part of the claim, set out which part before you give your grounds for contesting it. If you are a court or tribunal filing a submission, please indicate that this is the case.

## Section D

**D1.** Give details of any directions you will be asking the court to make.

- ☐ Set out below
- ☐ attached

**Note:** If you are seeking a direction that this matter be heard at an Administrative Court venue other than that at which this claim was issued, you should complete, lodge and serve on all other parties form **N464PC** with this acknowledgment of service.

## Section E

Response to the claimant's contention that the claim is an Aarhus claim

**E1.** Do you deny that the claim is an Aarhus Convention claim?

- ☐ Yes. Set out your grounds for denial in the box below.

- ☐ No

**E2.** Do you wish to vary the costs limits under CPR 45.43(2)?

- ☐ Yes. State the reason why you want to vary the limits on costs recoverable from a party.

- ☐ No

## Section F

### Statement of truth

I understand that proceedings for contempt of court may be brought against anyone 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 this form are true. I confirm that all relevant facts have been disclosed in this application.
- ☐ **The defendant** believes that the facts stated in this form are true. **I am authorised** by the defendant to sign this statement.
- ☐ **The interested party** believes the facts stated in this form are true. **I am authorised** by the interested party to sign this statement.

### Signature

- ☐ Defendant
- ☐ Litigation friend
- ☐ Defendant's legal representative (as defined by CPR 2.3(1))

### Date

Day

Month

Year

Full name

Name of defendant's legal representative's firm

If signing on behalf of firm or company give position or office held

Give an address to which notices about this case can be sent to you

Name

**Address**

Building and street

Second line of address

Town or city

County (optional)

Postcode

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If applicable

Phone number

DX number

Email



If you have instructed counsel, please give their name address and contact details below.

Name

**Address**

Building and street

Second line of address

Town or city

County (optional)

Postcode

If applicable

Phone number

DX number

Your reference

Email

**Completed forms**, together with a copy, should be lodged with the Administrative Court Office (court address, listed below), at which this claim was issued within 21 days of service of the claim upon you, and further copies should be served on the Claimant(s), any other Defendant(s) and any interested parties within 7 days of lodgement with the Court.

### **Administrative Court addresses**

#### **Administrative Court in London**

Administrative Court Office, Case Progression Team, Royal Courts of Justice, Strand, London, WC2A 2LL.

#### **Administrative Court in Birmingham**

Administrative Court Office, Birmingham Civil Justice Centre, Priory Courts, 33 Bull Street, Birmingham B4 6DS.

#### **Administrative Court in Wales**

Administrative Court Office, Cardiff Civil Justice Centre, 2 Park Street, Cardiff, CF10 1ET.

#### **Administrative Court in Leeds**

Administrative Court Office, Leeds Combined Court Centre, 1 Oxford Row, Leeds, LS1 3BG.

#### **Administrative Court in Manchester**

Administrative Court Office, Manchester Civil Justice Centre, 1 Bridge Street West, Manchester, M3 3FX.