N244

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	Fee accoun (if applicable)		Help with Fees – Ref. no. (if applicable)
For help in completing this form please read the notes for guidance form N244Notes. Find out how HM Courts and Tribunals Service uses personal information you give them when you fill in a form: https://www.gov.uk/government/organisations/hm-courts-and-tribunals-service/about/personal-information-charter			H W F
	Claimant's	name (including	ref.)
		s name (includin	g ref.)
	Date		
What is your name or, if you are a legal represe	ntative, the nam	ne of your firm?	?
Are you a Claimant De	fendant	Legal Re	presentative
Other (please specify)			
If you are a legal representative whom do you r	epresent?		
What order are you asking the court to make a	nd why?		
Have you attached a draft of the order you are	applying for?	Yes	☐ No
How do you want to have this application dealt	with?	at a heari	ng without a hearing
		at a remo	te hearing
How long do you think the hearing will last?		Hours	Minutes
Is this time estimate agreed by all parties?		Yes	☐ No
Give details of any fixed trial date or period			
What level of Judge does your hearing need?			
Who should be served with this application?			
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	dout how HM Courts and Tribunals Service es personal information you give them en you fill in a form: https://www.gov.uk/vernment/organisations/hm-courts-and-ounals-service/about/personal-information-arter What is your name or, if you are a legal represe Are you a Claimant De Other (please specify) If you are a legal representative whom do you re What order are you asking the court to make an Have you attached a draft of the order you are How do you want to have this application dealth How long do you think the hearing will last? Is this time estimate agreed by all parties? Give details of any fixed trial date or period What level of Judge does your hearing need? Who should be served with this application? Please give the service address, (other than de of the claimant or defendant) of any party name	warrant no did out how HM Courts and Tribunals Service es personal information you give them en you fill in a form: https://www.gov.uk/ vernment/organisations/hm-courts-and- pounals-service/about/personal-information- arter Date What is your name or, if you are a legal representative, the name of the court (please specify) If you are a legal representative whom do you represent? What order are you asking the court to make and why? Have you attached a draft of the order you are applying for? How do you want to have this application dealt with? How long do you think the hearing will last? Is this time estimate agreed by all parties? Give details of any fixed trial date or period What level of Judge does your hearing need? Who should be served with this application? Please give the service address, (other than details of the claimant or defendant) of any party named in	warrant no. (if applicable) d out how HM Courts and Tribunals Service so personal information you give them en you fill in a form: https://www.gov.uk/ vernment/organisations/hm-courts-and- punals-service/about/personal-information- arter Date What is your name or, if you are a legal representative, the name of your firm: Date What is your name or, if you are a legal representative, the name of your firm: Are you a

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10. What information will you be relying on, in support of your application?	
the attached witness statement	
the statement of case	
the evidence set out in the box below	
If necessary, please continue on a separate sheet.	

11.	Do you believe you, or a witness who will give evidence on your behalf, are vulnerable in any way which the court needs to consider?		
	Yes. Please explain in what way you or the witness are vulnerable and what steps, support or adjustments you wish the court and the judge to consider.		
	☐ No		

Statement of Truth

I understand that proceedings for contempt of court may be brought against a person 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 section 10 (and any continuation sheets) are true.			
The applicant believes that the facts stated in section 10 (and any continuation sheets) are true. I am authorised by the applicant to sign this statement.			
Signature			
Signature			
Applicant			
Litigation friend (where applicant is a child or a Protected Party)			
Applicant's legal representative (as defined by CPR 2.3(1))			
Date			
Day Month Year			
Full name			
Name of applicant's legal representative's firm			
If signing on behalf of firm or company give position or office held			

Applicant's address to which documents should be sent.
Building and street
Second line of address
Town or city
County (optional)
Postcode
If applicable
Phone number
Fax phone number
DX number
Your Ref.
Email