N244

Application notice

For help in completing this form please read the notes for guidance form N244Notes.



Name of court County Court at Edmonton		Claim no. D02ED073				
Fee account no. (If applicable)	Hel (If a	Help with Fees - Ref. no. (If applicable)				
	Н	W F		T		
Warrant no. (If applicable)						
Claimant's name (inch London Borough of Ref: LS/C/LI/15725	Enfield					
Defendant's name (inc Mr Simon Cordell Ref: VLS/EO/H/COR						
ate 21 December 2017						

 What is your name or, if you are a legal representative, the name of your firm? 							
	VLS SOLICITORS						
2.	. Are you a 🔲 Claimant		☐ Defendant	✓ Legal Representative			
		Other (please specify)					
	If you are a legal representative whom do you represent?		DEFENDANT				
3.	3. What order are you asking the court to make and why?						
AN ORDER THAT THE CLAIMANT PAYS THE DEFENDANT'S COSTS BECAUSE THE CLAIM CLAIM WAS STRUCK OUT							
4.	Have you atta	iched a draft of the order you	are applying for?	Yes	₩ No		
5,	. How do you want to have this application dealt with?		at a hearing	without a hearing			
	How long do you think the hearing will last?		Hours	Minutes			
	Is this time estimate agreed by all parties? Give details of any fixed trial date or period			☐ Yes	∐ No		
8. 1	. What level of Judge does your hearing need?						
9. \	Who should be served with this application?		CLAIMANT				
9a. f	Pa. Please give the service address, (other than details of the claimant or defendant) of any party named in question 9.		ENFIELD COUNCIL LEGAL SERVICES PO BOX 50 CIVIC CENTRE SILVER STREET ENFIELD EN1 3XA				
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