

Outcome or present state of the proceedings

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Date or expected date of trial

D	D	/	M	M	/	Y	Y	Y	Y
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Any other facts relevant to the question whether the application should be stayed

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Part 7 Special assistance or facilities if you attend court

If you are required to attend court during these proceedings will you need any special assistance or facilities?

☐ Yes (please supply details below) ☐ No

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Part 8 Service details

- ☐ I am not represented by a solicitor in these proceedings
☐ I am not represented by a solicitor in these proceedings but am receiving advice from a solicitor
☐ I am represented by a solicitor in these proceedings and all documents for my attention should be sent to my solicitor whose details are as follows:

Box 1 Solicitor's details

Name of solicitor											
Name of firm											
Address to which all documents should be sent for service	Telephone no.										
	Fax no.										
	DX no.										
	Your ref.										
Postcode		<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>				
E-mail											

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