Notice of funding of case or claim

Notice of funding by means of a conditional fee agreement, insurance policy or undertaking given by a prescribed body should be given to the court and all

other parties to the case:

- · on commencement of proceedings
- on filing an acknowledgment of service, other first document; and
- at any later time that such an arrangement is entered into, changed or terminated.

Take notice that in respect of { FORMCHECKBOX } all claims herein { FORMCHECKBOX } the following claims { FORMTEXT } { FORMCHECKBOX } the case of (specify name of { FORMTEXT } { FORMTEXT }{ FORMTEXT } being funded by: (Please tick those boxes which apply) { FORMCHECKBOX } a conditional fee agreement Dated { FORMTEXT } which provides for a success fee { FORMCHECKBOX } an insurance policy issued on Policy no -Date -{ FORMTEXT } { FORMTEXT } Name and address of insurer { FORMTEXT } Level of cover { FORMTEXT } Are the insurance premiums staged? { FORMCHECKBOX } Yes { FORMCHECKBOX } No If Yes, at which point is an increased premium payable

{ MERGEFIELD

TK_PICOURTDETS_tkCIVILCRT_name }

The court office is open between 10 am and 4 pm Monday to Friday. When writing to the court, please address forms or letters to the Court Manager and quote the claim number.

Claim No.

{ MERGEFIELD

TK_PICOURTDETS_tkCLAIMNO

Claimant
(include Ref.)

| WERGEFIELD
| "LINKNAME_FORENAME_1" } {
| MERGEFIELD
| MERGEFIELD
| MERGEFIELD
| TK_PIDEF1DETAIL_tkDEF1CONA
| = "" " | MERGEFIELD

In the

(include Ref.)	TK_PIDEF1DETAIL_tkDEF1CON = "" "{ MERGEFIELD	
· · · 	BOX } an undertaking given on RMTEXT }	
by Name of pres	cribed body	
{ FORMTEXT }		
in the following t		
{ FORMTEX	T }	
The funding of the	ne case has now changed:	
{ FORMCHECK ceased	BOX } the above funding has now	
{ FORMCHECK has been termin	BOX } the conditional fee agreement ated	
{ FORMCHECK	BOX } a conditional fee agreement	
Dated { FO	RMTEXT }	
which providented into	des for a success fee has been ;	
{ FORMCHECK	BOX } an insurance policy RMTEXT }	
has been cancelled		

Name and address of insurer

been issued on

{ FORMTEXT }

Date

{ FORMCHECKBOX } an insurance policy has

Policy no -

{ FORMTEXT }

{ FORMTEXT }	{ FORMTEXT }

Level of cover { FORMTEXT }	{ FORMCHECKBOX } an undertaking given on Dated { FORMTEXT }
Are the insurance premiums staged? { FORMCHECKBOX } Yes { FORMCHECKBOX } No If Yes, at which point is an increased premium payable { FORMTEXT }	has been terminated { FORMCHECKBOX } an undertaking has been giv Dated { FORMTEXT } Name of prescribed body { FORMTEXT } in the following terms { FORMTEXT }
Signed —	Dated { FORMTEXT }

Solicitor for the (claimant) (defendant) (Part 20 defendant) (respondent) (appellant)

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{ FORMCHECKBOX } Yes { FORMCHECKBOX }

If Yes, at which point is an increased

No

premium payable

{ MERGEFIELD		
TK PICOURTDETS tkCIVILCRT name }		
The court office is open between 10 am and 4 pm Monday to Friday. When		
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Claim No.	{ MERGEFIELD	
	TK_PICOURTDETS_tkCLAIMNO }	
Claimant	{ MERGEFIELD	
(include Ref.)	"LINKNAME FORENAME 1" } {	
	MERGEFIELD	
Defendant	{ IF { MERGEFIELD	
(include Ref.)	TK PIDEF1DETAIL tkDEF1CONA	
	= "" "{ MERGEFIELD	
{ FORMCHECKBOX } an undertaking given on		

In the

{ FORMCHECKBOX } an undertaking given on		
Dated { FORMTEXT }		
by Name of prescribed body		
{ FORMTEXT }		
in the following terms		
{ FORMTEXT }		
The funding of the case has now changed:		
{ FORMCHECKBOX } the above funding has now	N	
ceased		
{ FORMCHECKBOX } the conditional fee agreen has been terminated	nent	
	1	
{ FORMCHECKBOX } a conditional fee agreeme	nt	
Dated { FORMTEXT }		
which provides for a success fee has beer entered into;	1	
{ FORMCHECKBOX } an insurance policy		
Dated { FORMTEXT }		
has been cancelled		
{ FORMCHECKBOX } an insurance policy has		
been issued on		
Date Policy no		
{ FORMTEXT } { FORMTEXT }		
Name and address of insurer		
{ FORMTEXT }	ļ	

{ FORMTEXT }		

Level of cover	{ FORMCHECKBOX } an undertaking given
{ FORMTEXT }	On Dated
Are the insurance premiums staged? { FORMCHECKBOX } Yes { FORMCHECKBOX } No	{ FORMTEXT } has been terminated
If Yes, at which point is an increased premium payable { FORMTEXT }	{ FORMCHECKBOX } an undertaking has be: Dated in on { FORMTEXT } Name of prescribed body { FORMTEXT } in the following terms { FORMTEXT }
Signed	Dated { FORMTEXT }
Solicitor for the (claimant) (defendant) (Part 20 defendant) (respondent) (appellant)	

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