

Form Of Authority

I confirm I have read the Driscoll Kingston client care pack, including:

1. Conditional Fee Agreement (No win no fee agreement)
2. Protecting Yourself Financially (ATE Legal Expense Insurance)
3. Insurance Product Information Document (IPID)
4. Client Care Information

I instruct Ward Kemp to refer my case to Driscoll Kingston and to pass them my contact details, having read Ward Kemp's terms and conditions and in particular the section titled Financial Interests.

I would like Driscoll Kingston to act on my behalf and help me pursue my claim for damages on the basis of the CFA, with the protection from legal costs as provided by the ATE legal expense insurance policy.

In the event that my claim is successful, I irrevocably authorise Driscoll Kingston to have any damages recovered paid to them and for them to deduct the agreed charges, in accordance with the CFA and for them to further deduct the ATE legal expense insurance premium, where appropriate, and pay this to the insurer on my behalf.

Signed:

Name: Susan Drydale

Date: 17th September, 2020
