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## **UPPER TRIBUNAL ADMINISTRATIVE APPEALS CHAMBER**

# **Judicial Review** Acknowledgement of Service

## Please

Use black ink and complete the form in CAPITAL LETTERS. Use another sheet of paper if there is not enough space for you to say everything. (Please put your full name at the top of the sheet.)

Upper Tribunal Reference No.	
Applicant(s) (including ref.)	
Respondent(s)	
Interested Parties	

### **SECTION 1**

Please tick the appropriate box

- 1. I intend to oppose all of the application for permission.
- 2. I intend to oppose part of the application for permission.
- 3. I do not intend to oppose the application for permission.
- 4. The respondent (interested party) is a tribunal and intends to make a submission.
- 5. The respondent (interested party) is a tribunal and does not intend to make a submission.

٦	Complete sections 2, 3, 4
Ц	and 5

- Complete sections 2, 3, 4 and 5
- Complete section 5
- Complete sections 2, 3 and 5
- Complete sections 2 and 5

Note: If the application seeks to judicially review the decision of a tribunal, the tribunal need only provide the Upper Tribunal with as much evidence as it can about the decision to help the Upper Tribunal to perform its judicial function.

SECT	ION	<b>  2.</b>
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Insert the nan	ne and address of any pe	erson you consider	should be added	as an interest	ted party.
_					
Name					

Address

Telephone Fax No. No.

E-mail address

Name

Address		
Telephone No.	Fax No.	
E-mail address		
only part of t	Summary of grounds for opposing the application for permission. If you are oppose application set out which part before you give your grounds for opposing. If you are a submission, please indicate that this is the case.	sing a

SECTION 4.Give details of any directions you will be asking the Upper Tribunal to make, or tic the indicate that a separate application notice is attached	k
Set out below attached	

SECTION 5.		
*Delete as appropriate	*(I believe) (the respondent/interested party believes) that the facts stated in this form are true. *I am duly authorised by the respondent/interested party to sign this statement.	
Signed (to be signed b or your representative)	firm or company or	
Date		
Give an addre	ess to which notices about this case can be sent.	
Name		
Address		
Telephone	Fax No.	
No. E-mail address		
AFTER YOU	HAVE COMPLETED THIS FORM– please send or deliver it to	
11 <sup>™</sup> F		
	dgment of Service must be received by the Upper Tribunal <b>no later than 21 days</b> on which the office sent you a copy of the judicial review application form.	
The Office will let you know when they have received this form. Contact the Upper Tribunal office if you are not told within a week that the form had been received.		