



**UPPER TRIBUNAL  
ADMINISTRATIVE APPEALS CHAMBER**

**Judicial Review  
Acknowledgement of Service**

Upper Tribunal  
Reference No.

Applicant(s)  
(including ref.)

Respondent(s)

Interested  
Parties

**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.)

**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.

☐

Complete sections 2, 3, 4  
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.

**SECTION 2.**

Insert the name and address of any person you consider should be added as an interested party.

Name

Address

Telephone  
No.

Fax No.

E-mail  
address

Name

Address

Telephone  
No.

Fax No.

E-mail  
address

**SECTION 3. Summary of grounds for opposing the application for permission.** If you are opposing only part of the application set out which part before you give your grounds for opposing. If you are a tribunal filing a submission, please indicate that this is the case.

**SECTION 4. Give details of any directions you will be asking the Upper Tribunal to make, or tick the indicate that a separate application notice is attached**

☐

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 by you  
or your  
representative)

Position or Office held  
(if signing on behalf of  
firm or company or  
tribunal)

Date

Give an address to which notices about this case can be sent.

Name

Address

Telephone  
No.

Fax No.

E-mail  
address

**AFTER YOU HAVE COMPLETED THIS FORM**– please send it to

The Upper Tribunal (Administrative Appeals Chamber),  
11<sup>TH</sup> Floor Cardinal Tower  
12 Farringdon Road  
London  
EC1M 3HS.

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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.

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