

**32A.**

Para. 90B(2)

**Submissions for Application for Leave to Appeal against a Decision of the  
Appellate Division (Applicant)**

**Part A**

Case Number(s)	
Name(s) of Applicant(s) and Counsel	
Brief summary of the decision in respect of which leave to appeal is sought	
Pertinent facts / procedural history	
Point of law of public importance which the appeal will raise	
Ground(s) for the submission that it is appropriate for the Court of Appeal to hear a further appeal from the Appellate Division (to be elaborated upon below in Part B)	<input type="checkbox"/> A decision of the Court of Appeal is required to resolve the point of law <input type="checkbox"/> The interests of the administration of justice require the consideration by the Court of Appeal of the point of law <input type="checkbox"/> Other(s): _____

Note: These written submissions shall comply with the following requirements in paragraph 90B(3) of the Supreme Court Practice Directions

## **Part B**

### **Ground(s) for the submission that the appeal will raise a point of law of public importance**

*[State supporting reasons and include references to citations of legal authorities where relevant.]*

### **Ground(s) for the submission that it is appropriate for the Court of Appeal to hear a further appeal from the Appellate Division**

1. *[State the first ground, corresponding to the ground(s) as indicated in Part A]*

*[State supporting reasons and include references to citations of legal authorities where relevant.]*

2. *[State the second ground (if any), corresponding to the ground(s) as indicated in Part A]*<sup>^</sup>

*[State supporting reasons and include references to citations of legal authorities where relevant.]*

<sup>^</sup> Please omit/repeat as appropriate, corresponding to the ground(s) for the submission as indicated in Part A.

**Submissions on costs**

*[State (with reasons) the appropriate costs order and the quantum (including the disbursements incurred) that should be awarded by the Court.]*

**Any Other Matters**

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Signature of Applicant(s) or Counsel:  
Name: