

# Application notice

For help in completing this form please read the notes for guidance form N244Notes.



<b>Name of court</b> County Court at Edmonton		<b>Claim no.</b> D02ED073	
<b>Fee account no.</b> (if applicable)		<b>Help with Fees – Ref. no.</b> (if applicable)	
		H W F - [ ] [ ] [ ] - [ ] [ ] [ ]	
<b>Warrant no.</b> (if applicable)			
<b>Claimant's name</b> (including ref.) London Borough of Enfield Ref: LS/C/LI/157255			
<b>Defendant's name</b> (including ref.) Mr Simon Cordell Ref: VLS/EO/H/CORDELL/17			
<b>Date</b>		21 December 2017	

1. What is your name or, if you are a legal representative, the name of your firm?

VLS SOLICITORS

2. Are you a  Claimant  Defendant  Legal Representative  
 Other (please specify) [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

If you are a legal representative whom do you represent?

DEFENDANT

3. What order are you asking the court to make and why?

AN ORDER THAT THE CLAIMANT PAYS THE DEFENDANT'S COSTS BECAUSE THE CLAIMANT'S CLAIM WAS STRUCK OUT

4. Have you attached a draft of the order you are applying for?  Yes  No
5. How do you want to have this application dealt with?  at a hearing  without a hearing  
 at a telephone hearing
6. How long do you think the hearing will last? [ ] Hours [ ] Minutes  
 Is this time estimate agreed by all parties?  Yes  No
7. Give details of any fixed trial date or period [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
8. What level of Judge does your hearing need? [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
9. Who should be served with this application? CLAIMANT
- 9a. Please give the service address, (other than details of the claimant or defendant) of any party named in question 9.

ENFIELD COUNCIL  
 LEGAL SERVICES  
 PO BOX 50 CIVIC CENTRE  
 SILVER STREET  
 ENFIELD  
 EN1 3XA