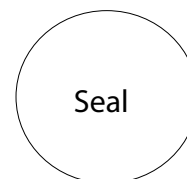


Planning Statutory Review**Part 8 Claim Form (CPR8.1(6) and
Practice Direction 8C)**

In the High Court of Justice
Planning Court in the Administrative Court

For Court use only	
Planning Court Reference No.	
Date filed	

**SECTION 1 Details of the claimant(s) and defendant(s)**

Claimant(s) name(s) and address(es)

name _____

address _____

Telephone no. _____ **Fax no.** _____

E-mail address _____

Claimant(s) or claimant(s) legal representative(s) address
to which documents should be sent.

name _____

address _____

Telephone no. _____ **Fax no.** _____

E-mail address _____

Claimant(s) Counsel's details

name _____

address _____

Telephone no. _____ **Fax no.** _____

E-mail address _____

1st Defendant

name _____

Defendant(s) or (where known) Defendant(s) legal
representative(s) address to which documents
should be sent.

name _____

address _____

Telephone no. _____ **Fax no.** _____

E-mail address _____

2nd Defendant

name _____

Defendant(s) or (where known) Defendant(s) legal
representative(s) address to which documents
should be sent.

name _____

address _____

Telephone no. _____ **Fax no.** _____

E-mail address _____

SECTION 2 Details of other interested parties as set out in paragraph 4 of PD 8C

Include name and address and, if appropriate, details of DX, telephone or fax numbers and e-mail

name		name	
address		address	
Telephone no.	Fax no.	Telephone no.	Fax no.
E-mail address		E-mail address	

SECTION 3 Details of the decision to be statutorially reviewed

Decision:

This claim for statutory review is being made under the following section as set out in CPR PD 8C 1.1:-

- ☐ section 287 of the Town and Country Planning Act 1990
- ☐ section 288 of the Town and Country Planning Act 1990
- ☐ section 63 of the Planning (Listed Buildings and Conservation Areas) Act 1990
- ☐ section 22 of the Planning (Hazardous Substances) Act 1990
- ☐ section 113 of the Planning and Compulsory Purchase Act 2004
- ☐ other, please state

Date of decision:

Name and address of the authority, tribunal or minister of the Crown who made the decision to be reviewed.

name	address
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SECTION 4 Permission to proceed with a claim for a planning statutory review

I am seeking permission to proceed with my claim for a planning statutory review.

Are you making any other applications? If Yes, complete Section 7.

☐ Yes

☐ No

Is the claimant in receipt of a Community Legal Service Fund (CLS F) certificate?

☐ Yes

☐ No

Are you claiming exceptional urgency, or do you need this application determined within a certain time scale? If Yes, complete Section 7.

☐ Yes

☐ No

Have you issued this claim in the region with which you have the closest connection? (Give any additional reasons for wanting it to be dealt with in this region in the box below). If No, give reasons in the box below.

☐ Yes

☐ No

Does the claim include any issues arising from the Human Rights Act 1998?

If Yes, state the articles which you contend have been breached in the box below.

☐ Yes

☐ No

SECTION 5 Detailed statement of grounds

☐ set out below

☐ attached

SECTION 6 Details of remedy (including any interim remedy) being sought

☐ set out below

☐ attached

SECTION 7 Other applications

☐ set out below

☐ attached

I wish to make an application for:-

SECTION 8 Statement of facts relied on

☐ set out below

☐ attached

SECTION 9 Supporting documents

If you intend to use a document to support your claim but do not presently have that document, identify it, give the date when you expect it to be available and give reasons why it is not presently available in the box below.

Please also tick the following boxes in relation to the papers you are filing with this claim form and any you will be filing later.

- | | | |
|---|---|-----------------------------------|
| <input type="checkbox"/> Detailed statement of grounds | <input type="checkbox"/> set out in Section 5 | <input type="checkbox"/> attached |
| <input type="checkbox"/> Application for directions | <input type="checkbox"/> set out in Section 7 | <input type="checkbox"/> attached |
| <input type="checkbox"/> Statement of the facts relied on | <input type="checkbox"/> set out in Section 8 | <input type="checkbox"/> attached |
| <input type="checkbox"/> Written evidence in support of the claim | | <input type="checkbox"/> attached |
| <input type="checkbox"/> Where the claim for a planning statutory review relates to a decision of a court or tribunal, an approved copy of the reasons for reaching that decision | | <input type="checkbox"/> attached |
| <input type="checkbox"/> Copies of any documents on which the claimant proposes to rely | | <input type="checkbox"/> attached |
| <input type="checkbox"/> A copy of the legal aid or CSLF certificate (<i>if legally represented</i>) | | <input type="checkbox"/> attached |
| <input type="checkbox"/> Copies of any relevant statutory material | | <input type="checkbox"/> attached |
| <input type="checkbox"/> A list of essential documents for advance reading by the court (<i>with page references to the passages relied upon</i>) | | <input type="checkbox"/> attached |

Reasons why you have not supplied a document and date when you expect it to be available:-

Statement of Truth

I believe (The claimant believes) that the facts stated in this claim form are true.

Full name _____

Name of claimant's legal representative's firm _____

Signed _____ Position or office held _____
Claimant ('s legal representative) (if signing on behalf of firm or company)