

Judicial Review Claim Form

In the High Court of Justice
Administrative Court

Notes for guidance are available which explain how to complete the judicial review claim form. Please read them carefully before you complete the form.

For Court use only	
Administrative Court Reference No.	CO/235/14
Date filed	02/05/14



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

Claimant(s) name and address(es)

name

address

Telephone no.

Fax no.

E-mail address

Claimant's or claimant's solicitors' address to which documents should be sent.

name

Hansen Palomares Solicitors

address

153 Kennington Road
London SE11 6SF

DX 332560 Kennington

Telephone no.

(020) 7640 4600

Fax no.

(020) 7640 4610

E-mail address

Claimant's Counsel's details

name

Jamie Burton

address

Doughty Street Chambers
11 Doughty Street
WC1N 2PL
DX 223 Chancery Lane

Telephone no.

020 7400 9018

Fax no.

020 72691287

E-mail address

j.burton@doughtystreet.co.uk

1st Defendant

name

LB Southwark

Defendant's or (where known) Defendant's solicitors' address to which documents should be sent.

name

Southwark Legal Services

address

2nd Floor Hub 2, 160 Tooley Street,
London, SE1P 5LX
DX136147
London Bridge 7

Telephone no.

020 7525 7649

Fax no.

020 7525 7586

E-mail address

janet.oduyoye@southwark.gov.uk

2nd Defendant

name

Defendant's or (where known) Defendant's solicitors' address to which documents should be sent.

name

address

Telephone no.

Fax no.

E-mail address

SECTION 2 Details of other interested parties

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

name

address

Telephone no. **Fax no.**

E-mail address

name

address

Telephone no. **Fax no.**

E-mail address

SECTION 3 Details of the decision to be judicially reviewed

Decision:

1. The Defendant's failure to provide the Claimant with suitable accommodation pursuant to s.188 Housing Act 1996
2. The Defendant's failure to record the Claimant's homelessness application as having been made on 30 January 2013 or alternatively 7 February.
3. The Defendant's failure to notify the Claimant of its decision pursuant to s.184(3) of the Housing Act 1996.
4. The operation by the Defendant of a number of policies and practices that unlawfully defer or avoid the making of homelessness applications and/or the provision of temporary accommodation under Part VII Housing Act 1996.

Date of decision:

Name and address of the court, tribunal, person or body who made the decision to be reviewed.

name

LB Southwark

address

25 Bornemouth Road, London, SE15 4UJ.

SECTION 4 Permission to proceed with a claim for judicial review

I am seeking permission to proceed with my claim for Judicial Review.

Is this application being made under the terms of Section 18 Practice Direction 54 (Challenging removal)? Yes No

Are you making any other applications? If Yes, complete Section 8. Yes No

Is the claimant in receipt of a Community Legal Service Fund (CLSF) certificate? Yes No

Are you claiming exceptional urgency, or do you need this application determined within a certain time scale? If Yes, complete Form N463 and file this with your application. Yes No

Have you complied with the pre-action protocol? If No, give reasons for non-compliance in the box below. 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

C and his family are living in unsuitable conditions that amount to a breach of their rights under article 8 ECHR.

SECTION 5 Detailed statement of grounds

set out below attached

SECTION 6 Aarhus Convention claim

I contend that this claim is an Aarhus Convention claim

Yes No

If Yes, indicate in the following box if you do not wish the costs limits under CPR 45.43 to apply.

If you have indicated that the claim is an Aarhus claim set out the grounds below:

SECTION 7 Details of remedy (including any interim remedy) being sought

1. An interim order compelling LBS to provide C and his family with suitable self-contained accommodation forthwith;
2. A mandatory order compelling LBS to register C's homelessness application from 30 January 2014 or at the latest on 7 February 2014;

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3. A declaration that LBS's decision to register C's homelessness application on 4 March 2014 is unlawful and an order quashing it;
4. A mandatory order compelling LBS to inform C of its decision on his application within 14 days;
5. A declaration that LBS policy as described above is unlawful
6. A mandatory order compelling LBS to review its policy and to publish new guidance for dealing with homelessness applications
7. An order for costs

SECTION 8 Other applications

I wish to make an application for:-

Interim relief as above and copy of the housing file.

See attached N462 and draft order

SECTION 9 Statement of facts relied on

See attached

Statement of Truth

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

Full name LARA TEN CATEN

Name of claimant's solicitor's firm Hansen Palomares Solicitors

Signed *Lara Ten Caten*
Claimant ('s solicitor)

Position or office held ASSOCIATE SOLICITOR
(if signing on behalf of firm or company)

SECTION 10 Supporting documents

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

Please tick the papers you are filing with this claim form and any you will be filing later.

- | | | |
|---|-----------------------------------|--|
| <input checked="" type="checkbox"/> Statement of grounds | <input type="checkbox"/> included | <input checked="" type="checkbox"/> attached |
| <input checked="" type="checkbox"/> Statement of the facts relied on | <input type="checkbox"/> included | <input checked="" type="checkbox"/> attached |
| <input type="checkbox"/> Application to extend the time limit for filing the claim form | <input type="checkbox"/> included | <input type="checkbox"/> attached |
| <input type="checkbox"/> Application for directions | <input type="checkbox"/> included | <input type="checkbox"/> attached |
| <input type="checkbox"/> Any written evidence in support of the claim or application to extend time | | |
| <input type="checkbox"/> Where the claim for judicial review relates to a decision of a court or tribunal, an approved copy of the reasons for reaching that decision | | |
| <input checked="" type="checkbox"/> Copies of any documents on which the claimant proposes to rely | | |
| <input checked="" type="checkbox"/> A copy of the legal aid or CLSF certificate <i>(if legally represented)</i> | | |
| <input checked="" type="checkbox"/> Copies of any relevant statutory material | | |
| <input checked="" type="checkbox"/> A list of essential documents for advance reading by the court <i>(with page references to the passages relied upon)</i> | | |

If Section 18 Practice Direction 54 applies, please tick the relevant box(es) below to indicate which papers you are filing with this claim form:

- | | | |
|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> a copy of the removal directions and the decision to which the application relates | <input type="checkbox"/> included | <input type="checkbox"/> attached |
| <input type="checkbox"/> a copy of the documents served with the removal directions including any documents which contains the Immigration and Nationality Directorate's factual summary of the case | <input type="checkbox"/> included | <input type="checkbox"/> attached |
| <input type="checkbox"/> a detailed statement of the grounds | <input type="checkbox"/> included | <input type="checkbox"/> attached |

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

Signed _____

Claimant ('s Solicitor) _____