

Notice of Application for apportionment of costs under regulation 21 of the Criminal Defence Service (Contribution Orders) Regulations 2009

4 An application should be made within 21 days of the date of sentence.

Application

Name of Defendant: _____ Date of birth: ____ / ____ / ____

Address of Defendant: _____

_____ Post code: _____

Crown Court Case Number: _____ MAAT Number: _____

Date of Sentence: ____ / ____ / ____

Name of Solicitor: _____ Account Number: _____

Address of Solicitor: _____

_____ Post code: _____

Grounds for applying:

(Set out the reason why you believe it would be manifestly unreasonable for the defendant to pay the full costs)

Proportion (%):

(State the percentage you believe is reasonable) _____

Signature: _____

Date: ____ / ____ / ____

Decision

*Granted/Refused

*Percentage Payable (If Granted):

Signature of Judge: _____

Date: ____ / ____ / ____

*Delete as appropriate