



Application for review of refusal or withdrawal of Controlled Legal Representation

- u page 1 to be completed by supplier
- u page 2 to be completed by supplier where you have refused or withdrawn CLR
- u page 3 to be completed by client where you have refused or withdrawn CLR
- u page 3 to be completed by client or supplier where we have refused or withdrawn CLR Please complete in Block Capitals

Client's Details

Title: _____ Initial: _____

Surname: _____ First name: _____

Date of Birth: _____

Address: _____

Town: _____

County: _____ Postcode: _____

Contact Telephone Number: _____

Supplier's Details

Name of supplier: _____

Address of supplier: _____

Town: _____

County: _____ Postcode: _____

Telephone number: _____

Contract number: _____

Details of action

The action is for:

MHRT

To be completed by the solicitor or category supervisor

If you have refused or withdrawn Controlled Legal Representation, give reasons, having regard to the criteria and the Contract Specification, as to why you do not consider representation justified in the particular case. State whether you have refused or withdrawn Controlled Legal Representation.

u *Continue on a separate sheet as necessary*

I confirm that the applicant is financially eligible for Controlled Legal Representation.

Signed _____
Solicitor or category supervisor

To be completed by the client if the supplier refuses or withdraws CLR. To be completed by the solicitor or category supervisor if the LSC refuses or withdraws CLR.

Give reasons for your application for a review of the refusal or withdrawal of representation.

- u *Continue on a separate sheet as necessary*
- u *Attach a copy of our decision and any other documentation in support of your application*

I confirm that the applicant is financially eligible for Controlled Legal Representation.

Signed: _____ Dated: _____