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Application Notice

- You must complete Parts A and B, and Part C if applicable.
- Send any relevant fee and the completed application to the Court with any draft Order, witness statement or other evidence; and sufficient copies of these for service on each Respondent.

You should provide this information for listing the Application
1. Do you wish to have your application dealt with at a hearing?

Yes ☐ No ☐ If yes, please complete 2

2. Time estimate (hours) (mins)
Is this agreed by all parties?

Level of Judge: Mr Justice Burton

3. Parties to be served: (i) The Department of Health of New Court, 48 Carey Street, London, WC2A 2LS
(ii) The Defendants

In the HIGH COURT OF JUSTICE
QUEEN'S BENCH DIVISION
RE: HEPATITIS LITIGATION

Claim No. 1998 A 458

Warrant No.
(if applicable)

Claimant:
(including ref.) A. AND OTHERS
(ref: AM/MJ/4465)

Defendant(s)
(including ref.) THE NATIONAL BLOOD
AUTHORITY
(ref: 575/8263.1/AL)

Date: 17 November 1999

PART A

1. Enter your full name, or name of Solicitor

We Deas Mallen Souter on behalf of the Claimants

2. State clearly what order you are seeking and if possible attach a draft

Intend to apply for an Order (a draft of which is attached) that⁽²⁾

(i) The Department of Health to disclose:-

(a) all documents, letters, reports, internal memoranda and other documentation relevant to the introduction of surrogate or routine anti HCV screening generated during the period 1.3.1988 to 1.9.1991.

(b) Minutes of the meetings of the Advisory Committee on Hepatitis.

(c) Minutes of the meetings of the National Blood Transfusion Service/National Institute of Biological Standards and Controls Liaison Committee.

(ii) That the Department of Health pay the Claimants' costs in connection with this Application.

Because - the Application is made pursuant to Part 31 r. 17 of the CPR and Section 34 of the Supreme Court Act 1981.

3. Briefly set out why you are seeking the order. Include the material facts on which you rely, identifying any rule or statutory provision

Part B

We wish to rely on: tick one box

The attached (witness statement) ☐

My statement of case ☐

Evidence in Part C overleaf in support of my application ☐

4. If you are not already a party to the proceedings, you must provide an address for service of documents

Signed

Position or office held
(if signing on behalf of firm or Company)

PARTNER

D

(Applicant's Solicitor)

Address to which documents about this claim should be sent (including reference if appropriate)⁽⁴⁾

Deas Mallen Souter (Ref: AM/MJ/4465) Eldon Chambers 23 The Quayside Newcastle upon Tyne Tel: 0191 221 0898 Postcode: NE1 3DE		(if applicable)
	Fax No.	0191 232 0930
	DX No.	61085, Newcastle upon Tyne
	E-mail	advice@dms-law.co.uk

The Court office at The Royal Courts of Justice, The Strand, London

is open from 10am to 4pm Monday to Friday. When corresponding with the Court please address forms or letters to the Court Manager and quote the claim number.
N.244 Application Notice (4.99)

Part C

Claim No. 1998 A 458

R

A

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Statement of Truth		
* I believe that the facts stated in this Application are true * delete as appropriate		
Signed	 (Applicant's Solicitor)	Position or office held
		PARTNER
Date		17 November 1999

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