

Serial No.

insert Court ref.

Name of Court or Tribunal in which substantive proceedings exist

Parties to this Application

insert name of person applying for a Temporary Advocates Licence

Applicant

insert the other parties' names

Respondent(s)

Full name and business address of individual(s) in whose name you wish a Temporary Advocate's Licence ("TAL") to be issued to

insert name of proposed recipient of a TAL

Address

**Qualification of proposed Temporary Advocate:**

Member of the Bar of England and Wales

Member of the Scottish Bar

Member of the Bar of Northern Ireland

**A copy of the CV is attached**

(required)

**A copy of the practising certificate is attached**

(required)

**Date(s) of any hearings or trials listed in respect of the substantive proceedings**

insert dates

**Grounds relied upon:**

- no Isle of Man Advocate is available (now Complete Box A)
- an Advocate is available but they could not act without a conflict of interest occurring (now Complete Box B)
- the proceedings require knowledge and experience of a nature not ordinarily available in the Island (now Complete Box C)
- the proceedings are likely to be so lengthy that they would impose unreasonable demands on the time and resources of such an Advocate (now Complete Box D)

**If more than 1 ground is relied upon, you must complete all corresponding Boxes**

**If you need to continue on a separate sheet please use the prescribed form – 'HCC CONTINUATION SHEET'**

**BOX A**

**If no Isle of Man Advocate is available, state the attempts made to find someone suitably qualified locally:**

(any documents evidencing your enquiries should be attached)

**BOX B**

**If an advocate is available but they could not act without a conflict of interest occurring, set out the details of the conflict (insofar as they are known) and the attempts made to find someone else who suitably qualified locally:**

(any documents evidencing your enquiries should be attached)

**BOX C**

**If the proceedings require knowledge and experience of a nature not ordinarily available in the Island, state the particular knowledge and experience required for your case, why it is required and efforts to locate an Advocate with that knowledge and experience:**

(any documents evidencing your enquiries should be attached)

**BOX D**

**If the proceedings are so lengthy that they would impose unreasonable demands on the time and resources of such an advocate, state the precise or estimated length of the hearing:**

(any documents evidencing your enquiries should be attached)

**Any other relevant information:**

(any documents evidencing your enquiries should be attached)

**Statement of truth**

[I believe ] [The applicant believes ] that the facts stated in this application (and any continuation sheets) are true.

(indicate as appropriate)

**Signed**

(type or print full name here) **insert full name**

[Applicant

(indicate as appropriate)

**Name of applicant's advocate's firm**

**Insert name of firm**

**Position of office held (if signed on behalf of a company or other corporation)**

**Insert position of office held**

**Date** **insert date**

**Applicant or applicant's advocate's address in the Isle of Man (including postcode) to which documents should be sent:**

Address

**Telephone no:**

Telephone no

**Fax no. (if appropriate):**

Fax no.

**E-mail (if appropriate):**

Email

**Reference (if any):**

Reference

**Service of the Application**

You must now arrange to file this Application in hard copy at the Isle of Man Courts of Justice, Deemsters Walk, Douglas, Isle of Man, IM1 3AR and **MUST** serve a copy of the same on any other party to the substantive proceedings.