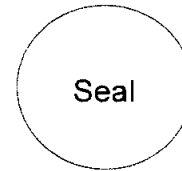


Judicial Review Claim Form

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.	
Date filed	



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

Claimant(s) name and address(es)

name
Jacob O'Callaghan

address
4a Bishopswood Road
Highgate
London N6 4NY

Telephone no. **Fax no.**

E-mail address
joc@cix.co.uk

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

name
Kate Harrison

address
Harrison Grant Solicitors
15 Wolsey Mews
London NW5 2DX

Telephone no. **Fax no.**

020 7267 6727 020 7267 6272

E-mail address
kateharrison@hglaw.co.uk

Claimant's Counsel's details

name
David Wolfe

address
Matrix Chambers ref:59507
Griffin Building
Gray's Inn
London WC1R 5UN

Telephone no. **Fax no.**

020 7404 3447 020 7404 3448

E-mail address
davidwolfe@matrixlaw.co.uk

1st Defendant

name
The Charity Commission for England and Wales

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

name
Arnikka Macintyre-Daly

address
Treasury Solicitors ref:LT70214A/AVD/3B
One Kemble Street
London WC2B 4TS
DX 123242 Kingsway

Telephone no. **Fax no.**

020 7210 3468 020 210 3001

E-mail address
arnikka.macintyre-daly@tsol.gsi.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 *and see attached details for 3rd interested party.*

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

name
Howard Kennedy Solicitors on behalf of the Trustees of Alexandra Palace

address
Howard Kennedy ref:IMH1/014086.00049
19 Cavendish Square
London W1A 2AW

DX 42748 Oxford Circus North

Telephone no.
020 7636 1616

Fax no.
020 7664 4586

E-mail address

name
Lewis Silkin Solicitors on behalf of the potential lessees (Firoka)

address
Lewis Silkin LLP ref:JDL/FXW/3393.184/1472552-1
5 Chancery Lane
Clifford's Inn
London EC4A 1BL
DX 182 Chancery Lane

Telephone no.
020 7074 8000

Fax no.
020 7864 1200

E-mail address

SECTION 3 Details of the decision to be judicially reviewed

Decision:
Order of the Charity Commission for England and Wales

Date of decision:
4th May 2007

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

name
The Charity Commissioners

address
Harmsworth House
13-15 Bouverie Street
London EC4Y 8DP

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 7. 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 space 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 space below. Yes No

SECTION 5 Detailed statement of grounds

set out below attached

SECTION 6 Details of remedy (including any interim remedy) being sought

The claimant seeks:

- a declaration that the Order of the Charity Commission for England and Wales of 4th May 2007 was unlawful;
- an order quashing the Order, and
- such further or other relief as the court consider appropriate.

SECTION 7 Other applications

I wish to make an application for:-

The Claimant is contemplating making an application for a protected costs order. However, at this stage negotiations are continuing and for this reason non is made at this stage.

SECTION 8 Statement of facts relied on

attached

Statement of Truth

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

Full name Kate Harrison

Name of claimant's solicitor's firm Harrison Grant

Signed *Kate Harrison* Position or office held Partner

Claimant ('s solicitor)

(if signing on behalf of firm or company)

SECTION 9 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 checked="" 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 type="checkbox"/> A copy of the legal aid or CSLF 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) _____

Re: R on the application of Jacob O'Callaghan

Judicial Review Claim Form

Additional information, page 2

SECTION 2 CONTINUED

Name, address and details of 3rd interested party.

Name

The Attorney General

Address

Eleanor Hay
Treasury Solicitors
One Kemble Street
London WC2B 4TS

Direct line: 020 7210 3418

Direct fax: 020 7210 3232

Eleanor.hay@tsol.gsi.gov.uk

Reference: LT2027F/EFH/1EP