## Application notice Name of court High Court Queens Bench Division For help in completing this form please read Petition M343/W Claim no. the notes for guidance form N244Notes. Warrant no. (if applicable) Colin Roberts Claimant's name (including ref.) Richard Blunt Defendant's name (including ref.) 10th December 2012 Date 1. What is your name or, if you are a solicitor, the name of your firm? [ ] Claimant Solicitor 2. Are you a Defendant Other (please specify) Petitioner If you are a solicitor whom do you represent? 3. What order are you asking the court to make and why? Application to withdraw the petition. The withdrawal is on the basis of the escalation of the costs of the Petition, as well as the uncertainty around the legal principles involve 4. Have you attached a draft of the order you are applying Adriz. 5. How do you want to have this application dealt with? at a hearing without a hearing at a telephone hearing Minutes Hours 6. How long do you think the hearing will last? Is this time estimate agreed by all parties? Yes

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7. Give details of any fixed trial date or period

8. What level of Judge does your hearing need?

9. Who should be served with this application?

23-25/1/2012 before Election Commisioner)

Respondent, Returning Officer

**High Court** 

10. What information will you be relying on, in support	of your application?
the attached witness staten	nent
the statement of case	
the evidence set out in the	box below
If necessary, please continue on a separate sheet.	
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Statement of Truth	
(I believe) (The applicant believes) that the facts sta	sted in this section (and any continuation sheets) are true,
_	Dated
Applicant('s Solicitor)('s litigation friend)	
Full name Colin Arthur Roberts	
Name of applicant's solicitor's firm	
Position or office held	140
(II algining on certain of tirm of company)	
1. Signature and address details	
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Applicant('s Solicitor)('s litigation friend)	Dated
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Position or office held (if signing on behalf of firm or company)	
	attantan ahar lahka asad
Applicant's address to which documents about this ap	If applicable
Tempe House Swapstone	Phone no. E
Leicestershire	
	Fax no.
Postcode	DX no.
L E 6 7 2 S G	Ref no.
E-mail address  colin@tempehouse.co.uk	