SUPREME COURT
FALKLAND ISLANDS

FORM A1

NOTICE OF [INTENTION TO PROCEED WITH] A FINANCIAL APPLICATION TO WHICH THE FAST-TRACK PROCEDURE APPLIES

This form should only be completed if you applying for one of the following orders for financial provision (a financial order or other financial remedy) to which the fast-track procedure applies:

- an application for a periodical payments order **only** (under section 26 of the Matrimonial and Civil Partnerships Proceedings Ordinance 1979 or paragraphs 1 or 2 of Schedule 1 to the Children Ordinance 2014)
- An application to vary or discharge a periodical payments order, **except** where you seek to discharge it and to substitute for it one or more of the following orders: a lump sum order, a property adjustment order, a pension sharing order or a pension compensation sharing order - **use Form A** in these circumstances.

If you are applying for:

- a periodical payments order **together with** another type of financial order or financial remedy - please complete **Form A.**
- Financial provision after an overseas divorce (use Form D50F) or on the ground of failure to maintain a party or child (use Form D50C) or for alteration of a maintenance agreement during the parties' lifetime (use Form D50H).

Case reference: SC/CIV/

Full name of applicant

Full name of respondent(s)

Nature of application

This application is for financial provision, including provision to be made to or for the benefit of the child(ren):

☐ In connection with matrimonial or civil partnership proceedings (divorce, dissolution etc), **or**

☐ Under paragraphs 1 or 2 of Schedule 1 to the Children Ordinance 2014

tick the statement that applies	**and**	tick one or more of the following orders

The applicant intends

☐ **To apply** to the Court for, **or**

☐ **To proceed with** the application in the [divorce] [dissolution] [nullity] [annulment] [(judicial) separation] application for, **or**

☐ To apply to vary, **or**

☐ To apply to discharge

☐ A periodical payments order **only**

Are you applying for an order by consent in terms of written agreement (a consent order)?

☐ Yes, **attach the draft order to this form**

☐ no

1. Further details of the financial application

If an application is made for any periodical payments or secured periodical payments for children, please complete this section

- ☐ there is a written agreement about maintenance for the benefit of children
- ☐ there is no agreement, but the applicant is applying for payments:
  - ☐ for a stepchild or stepchildren
  - ☐ In addition to maintenance already paid under a court order
  - ☐ To meet expenses arising from a child's disability
  - ☐ To meet expenses incurred by a child in being educated or training for work
  - ☐ When either the child or the person with care of the child or the absent parent of the child is not habitually resident in the Falkland Islands

If your application includes an application in relation to one or more children, please complete the tables below for each child, continuing on additional sheets if necessary.

Name of child 1

Date of birth

Sex ☐ Male ☐ Female

Relationship to applicant

Relationship to respondent

Country of residence (if not the Falkland Islands)

Name of child 2

Date of birth

Sex ☐ Male ☐ Female

Relationship to applicant

Relationship to respondent

Country of residence (if not the Falkland Islands)

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2. Service Details

- ☐ I am not represented by a legal practitioner in these proceedings (please give your address overleaf or complete C8)
- ☐ I am not represented by a legal practitioner in these proceedings but am receiving advice from a legal practitioner (please give your address overleaf or complete C8)

- ☐ I am represented by a legal practitioner in these proceedings, who has signed section 3.

Address for Service

Name of legal practitioner

Name of firm

Address to which all documents should be sent for service

(if you have ticked the third box on the previous page, this must be your legal practitioner's address)

Address:

Phone number

Email address

Respondent's address for service

This should be either

- the respondent's legal practitioner's address, if a legal practitioner has been appointed and you know the details, or
- The respondent's own address for service

Name of legal practitioner

Name of firm

Address to which all documents should be sent for service

(respondent's own, or respondent's legal practitioner, if applicable)

Address:

Phone number

Email address

Important

If you do not wish your address to be made known to the respondent, leave the address details blank and **complete Confidential contact details form C8.**

Please ensure that any documents submitted with this form or at a later date, **do not** disclose the confidential contact details you wish to withhold.

Email

If you provide an email address, this will be how the court will contact you. If you **do not** wish for the court to contact you about this application by email, please do not provide an email address.

3. Statement of truth

* delete as appropriate

* [I believe] [the Applicant believes] that the facts stated in this application are true

* I am duly authorised by the applicant to sign this statement.

Print full name

Name of applicant's legal practitioner's firm
(if applicable)

Address of legal practitioner's firm
(if applicable)

Signed

** delete as applicable* *(Applicant) (Applicant's Legal Practitioner)

Dated

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

Attach Files

Submit Form