N2	244			Name of cou	rt	C	Claim no.		
Application notice			KING'S BENCH						
			Fee account (if applicable)	no.	Help v (if appl	<b>vith Fees – Ref. no.</b> icable)			
		eting this form please read ance form N244Notes.		PBA0077713		HW	<b>F</b> -		
uie	e notes for guid	ance 10111 11244110tes.		Warrant no. (if applicable)					
us	es personal in	1 Courts and Tribunals S formation you give them form: https://www.gov.		Claimant's name (including ref.) HANSON QUARRY PRODUCTS EUROPE LIMITED (HAN226/2561)					
tril	-	anisations/hm-courts-ar e/about/personal-inform		Defendant's name (including ref. COURT OF JUST PERSONS UNKNOWN					
				Date		20 MA			
						20	) May 2024		
1.	. What is your name or, if you are a legal representative, the name of your firm?								
Knights Professional Services Limited									
							2024-001463		
2.	Are you a	Claimant	Defen	dant	<ul> <li>Legal Re</li> </ul>	preser	Event ID: 1		
		Other (please specify)							
	lf			+2	Claimant/A	oplicar	nt		
	If you are a leg	al representative whom do	o you repre	esent?					
3.	Interim injunct	e you asking the court to m ive relief against the Defer Claimant on land known a cting access or egress to c	ndants, for as the Cra	bidding them ig Yr Hesg Q	from (i) ente uarry, Berw F	<del>ring or</del> Road, I	remaining without the Pontypridd, CF37 3BG;		
4.	Have you attached a draft of the order you are applyi			lying for?	✓ Yes		🗌 No		
5.	How do you wa	ant to have this applicatior	n dealt wit	:h?	🖌 at a heari	ing	without a hearing		
					🗌 at a remo	ote hea	aring		
6.	How long do y	ou think the hearing will la	st?		1 Hours	5	0 Minutes		
	Is this time est	imate agreed by all parties	s?		Yes		🖌 No		
7.	Give details of	any fixed trial date or perio	od						
8.	8. What level of Judge does your hearing need?				High Court Judge				
9.	Who should be		Persons Unknown						
9a. Please give the service address, (other than details of the claimant or defendant) of any party named in question 9.					N/A				

10.	What information	will you b	e relying on	, in support	of your	application?
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 $\checkmark$  the attached witness statement

☐ the statement of case

 $\hfill\square$  the evidence set out in the box below

If necessary, please continue on a separate sheet.

- 11. Do you believe you, or a witness who will give evidence on your behalf, are vulnerable in any way which the court needs to consider?
  - Yes. Please explain in what way you or the witness are vulnerable and what steps, support or adjustments you wish the court and the judge to consider.

🖌 No

## Statement of Truth

I understand that proceedings for contempt of court may be brought against a person who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.



**I believe** that the facts stated in section 10 (and any continuation sheets) are true.

The applicant believes that the facts stated in section 10 (and any continuation sheets) are true. I am authorised by the applicant to sign this statement.

## Signature

J. Dali

✓ Applicant

Litigation friend (where applicant is a child or a Protected Party)

Applicant's legal representative (as defined by CPR 2.3(1))

## Date

Day	Month	Year
2 0	5	2 0 2 4

Full name

ASTRID VERENA DAHL

Name of applicant's legal representative's firm

Knights Professional Services Limited

If signing on behalf of firm or company give position or office held

Area General Manager

Applicant's address to which documents should be sent.

Building and street

Knights Professional Services Limited

Second line of address

The Brampton

Town or city

Newcastle under Lyme

County (optional)

Staffordshire

Postcode



If applicable

Phone number

01782 619225

Fax phone number

DX number

Your Ref. HAN226/2561

Email cyhquarry@legal-contact.com