N244 Application notice		Name of court (k		Claim no. KB-2024-001463			
		High Court (KBD) Fee account no. (if applicable)		Help with Fees – Ref. no. (if applicable)			
For help in completing this form please re	ead	PBA0077713					
the notes for guidance form N244Notes.		Warrant no. (if applicable)					
Find out how HM Courts and Tribunals Service uses personal information you give them when you fill in a form: https://www.gov.uk/ government/organisations/hm-courts-and- tribunals-service/about/personal-information- charter		Claimant's name (including ref.) HANSON QUARRY PRODUCTS EUROPE LIMITED (T/A HEIDELBERG MATERIALS UK)					
		Defendant's name (including ref.) OURT OF D1 - 3 DIFFERENT CATEGORIES OF PERSONS UNKNOWN					
		Date		15 May 2025			
OUR O							
1. What is your name or, if you are a legal representative, the name of your firm?							
				KB-2024-001463			
2. Are you a Claimant Defendant - Legal Representative							
Other (please specify	y)						
If you are a legal representative whom	If you are a legal representative whom do you represent?						
3. What order are you asking the court to	o make and v	vhy?					
An order in the form of the draft order (i) a continuation of the injunction imp (ii) that the claim is extended until furt							
4. Have you attached a draft of the order you are applying for? Yes No				No No			
5. How do you want to have this applicat	tion dealt wit	:h?	🖌 at a hear	ing 🗌 without a hearing			
			at a remote hearing				
6. How long do you think the hearing will last? Is this time estimate agreed by all parties?			2 Hours	s 00 Minutes			
			Yes	✓ No			
7. Give details of any fixed trial date or period							
8. What level of Judge does your hearing need?		High Court Judge					
9. Who should be served with this application?		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.	10. What information will you be relying on, in support of your application?					
	\checkmark the attached witness statement					
	the statement of case					
	the evidence set out in the box below					
	If necessary, please continue on a separate sheet. Please see the attached witness statement of Mr Julian Radcliffe					

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. Jahl

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	
1 5	0 5	2 0 2	25

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

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If applicable

Phone number 01782 619225

Fax phone number

DX number

Your Ref. HAN226/2561

Email cyhquarry@legal-contact.com