N244

Application notice	King's Bench Div	King's Bench Division		
For help in completing this form please read the notes for guidance form N244Notes.	Fee account no. (if applicable)	Help with Fees – Ref. no. (if applicable)		
Find out how HM Courts and Tribunals Service		H W F		
uses personal information you give them when you fill in a form: https://www.gov.uk/	Warrant no. (if applicable)			
government/organisations/hm-courts-and- ribunals-service/about/personal-information- charter	Claimant's name (including ref.) Shell U.K. Limited OLDFIEA/SHELL			
	Defendant's name (incompersons unknown to this applicat	as set out in the appendix		
	Date	11 April 2024		
1. What is your name or, if you are a legal representative, the name of your firm? Eversheds Sutherland (International) LLP				
. Are you a Claimant Defendant X Legal Representative				
Other (please specify)				
If you are a legal representative whom do you represent? Claimant				
3. What order are you asking the court to make and \	why?			
1. Pursuant to CPR 6.15 and 6.27, in circumstances where it has been identified that attachments can be too large to attach to an email and that an interested party may no longer live at the last known address provided to the Claimant: a. an order the steps already taken by the Claimant in the proceedings QB-2022-001241 to bring the 2024 Documents to the attention of an interested party known as Jessica Branch, shall be good service:				
 an order to vary the requirements for alternative service of future documents in QB-2022-001241 to effect service on the Defendants and any interested parties by sending an email providing a link to the Claimants' website where copies are available and by sending copies to an interested party's solicitor. 				
2. For this application to be heard at the revi paragraph 17 of the Soole J Order.	ew hearing listed on 17 Ap	oril 2024 in accordance with		
4. Have you attached a draft of the order you are app	olying for? X Yes	No		
5. How do you want to have this application dealt with	n? X at a hea	aring without a hearing		
	at a rem	note hearing		
6. How long do you think the hearing will last?	Hou	Minutes		
Is this time estimate agreed by all parties?	Yes	X No		

Name of court

High Court Of Justice

Claim no.

QB-2022-001241

7.	Give details of any fixed trial date or period	Review Hearing listed on 17 April 2024. Claimant considers this application can be heard at the same time without impacting the time estimate
8.	What level of Judge does your hearing need?	Judge
9.	Who should be served with this application?	Claimant will arrange service on the Defendants
	Please give the service address, (other than details of the claimant or defendant) of any party named in question 9.	Claimant will arrange service on interested parties
10.	What information will you be relying on, in support of your applicatio	n?
	X the attached witness statement	
	the statement of case	
	the evidence set out in the box below	
	If necessary, please continue on a separate sheet. The attached Eighth Witness Statement of Alison Oldfield dated 1	

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.
	x No

Statement of Truth

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				
A Toldperd				
Applicant				
Litigation friend (where applicant is a child or a Protected Party)				
X Applicant's legal representative (as defined by CPR 2.3(1))				
Date				
Day Month Year				
11th April 2024				
Full name				
Alison Oldfield				
Name of applicant's legal representative's firm				
Eversheds Sutherland (Intl) LLP				
If signing on behalf of firm or company give position or office held				
Partner				

Applicant's address to which documents should be sent.

Building and street	
Bridgewater Place, Water Lane	
Second line of address	
Town or city	
Leeds	
County (optional)	
Postcode	
L S 1 1 5 D R	
If applicable	
Phone number	
020 7497 9797	
Fax phone number	
020 7919 4919	
DX number	
DX 12027 Leeds - 27	
Your Ref.	
Email	