

**NOTICE OF APPEAL
LEGAL PRACTICE TRIBUNAL**

LPTA NUMBER:

[number inserted by LPT]

NUMBER:

[insert number from LPC]

Applicant: *[Insert appellant or respondent, as appropriate].*

AND

Respondent: *[Insert respondent or respondent, as appropriate].*

NOTICE OF APPEAL

To the respondent

And to the Secretariat of the Legal Practice Committee

TAKE NOTICE that the appellant appeals to the Legal Practice Tribunal against *[specify whether the whole or a part, and if a part, which part]* of the order of the Legal Practice Committee.

1. THE DETAILS OF THE DECISION APPEALED AGAINST ARE –

Date of decision:

Description of Proceedings: *[eg number and year]*

Description of parties involved in the proceedings *[including full names and party title eg applicant]*

as

And

as

Name of Members of Legal Practice Committee:

NOTICE OF APPEAL

Filed on behalf of the (Party)

Rule 7(2) Legal Profession (Tribunal and Committee) Rule 2007

Form LPT1, Version 1

Insert contact details of Appellant

2. GROUNDS -

[Specify briefly the grounds of appeal]

3. ORDERS SOUGHT -

[Specify the order sought in lieu of that appealed from including any special order as to costs]

4. RECORD PREPARATION

I/We undertake to cause a record to be prepared and lodged, and to include all material required to be included in the record under the rules and practice directions and any order or direction in the proceedings.

PARTICULARS OF THE APPELLANT:

Name:

Residential or business address:

Appellant's solicitor's name:
and firm name:

Solicitor's business address:

Address for service:

DX(if any):

Telephone:

Fax:

E-mail address (if any):

[If the appellant has no solicitor:

appellant's address for service:

appellant's telephone number or contact number:

appellant's fax number (if any):

appellant's e-mail address (if any):]

PARTICULARS OF THE RESPONDENT:

Name:

Residential or business address:

Respondent's solicitor's name:
and firm name:

Solicitor's business address:

Address for service:

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Rule 7(2) Legal Profession (Tribunal and Committee) Rule 2007

Form LPT1, Version 1

Insert contact details of Appellant

DX (if any):

Telephone:

Fax:

E-mail address (if any):

[If the respondent has no solicitor:

respondent's address for service:

respondent's telephone number or contact number:

respondent's fax number (if any):

respondent's e-mail address (if any):]

Signed: *[appellant or solicitor]*

Description: *[of signatory]*

Dated:

This Notice of Appeal is to be served on: *[respondent's name]*

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Insert contact details of Appellant