

Certificate of service/non-service notification/non-notification

Please refer to the guidance notes for COP20B before completing this form

Full name of person to whom the application/appeal relates
(this is the person who lacks, or is alleged to lack, capacity)

{ MERGEFIELD FW_PER_REL_FW_CLI1_TITLE \f" " } { MERGEFIELD
"FW_PER_REL_FW_CLI1_FNAME" \f" " } { MERGEFIELD
"FW_PER_REL_FW_CLI1_MNAME" \f" " } { MERGEFIELD
"FW_PER_REL_FW_CLI1_SNAME" }

Section 1 – Details of the person who provided service/notification

1.1 Full name:

{ IF { MERGEFIELD FW_INSTR_FW_APP_SRV1 } = "Yes" "{ MERGEFIELD
CALCULATION_FEE_EARNER_DESCRIPTION }" "{ MERGEFIELD
FW_APP1_FW_A1_TITLE } { MERGEFIELD FW_APP1_FW_A1_FNAME } { MERGEFIELD
FW_APP1_FW_A1_SNAME }" }

1.2 In what capacity are you providing notice?

As the:

{ IF { MERGEFIELD FW_INSTR_FW_APP_SRV1 } =
"Yes" } Applicant

{ FORMCHECKBOX } Appellant { FORMCHECKBOX } Respondent

{ IF { MERGEFIELD FW_INSTR_FW_APP_SRV1 } =
"No" } Applicant's
solicitor

{ FORMCHECKBOX } Appellant's solicitor { FORMCHECKBOX } Respondent's solicitor

{ FORMCHECKBOX } Applicant's litigation friend { FORMCHECKBOX } Agent { FORMCHECKBOX } Respondent's litigation friend

{ FORMCHECKBOX } Agent

{ FORMCHECKBOX } Other (Please give details)

{ FORMTEXT }

Section 2 – People served (See Section 3 for people notified)

2.1 Title or description of the document (tick only one box)

{ FORMCHECKBOX } Application form (plus supporting evidence)

{ FORMCHECKBOX } Appellant's notice

{ FORMCHECKBOX } Respondent's notice

{ FORMCHECKBOX } Certificate of suitability of litigation friend

{ FORMCHECKBOX } Other (Please give details)

{ FORMTEXT }

Please photocopy this sheet before use if additional people need to be served

2.2 In respect of all served

1. Name of person served

```
{ MERGEFIELD  
FW_RES_FW_RES1_TITLE } {  
MERGEFIELD  
FW_RES_FW_RES1_FNAME } {  
MERGEFIELD  
FW_RES_FW_RES1_SNAME }
```

Address of service

```
{ MERGEFIELD  
FW_RES_FW_RES1_ADD1 \f" "  
{ MERGEFIELD  
FW_RES_FW_RES1_ADD2 \f" "  
{ MERGEFIELD  
FW_RES_FW_RES1_TOWN \f" "  
{ MERGEFIELD  
FW_RES_FW_RES1_COUNTY \f" "  
{ MERGEFIELD  
FW_RES_FW_RES1_PCODE \f" "
```

Date of service

```
{ MERGEFIELD  
FW_RES_FW_RES1_NOT1 }
```

Method of service

```
{ FORMCHECKBOX } 1st class post {  
FORMCHECKBOX } fax
```

```
{ FORMCHECKBOX } in person {  
FORMCHECKBOX } other electronic means
```

```
{ FORMCHECKBOX } DX {  
FORMCHECKBOX } permitted address
```

```
{ FORMCHECKBOX } alternative method as  
directed by court order
```

2. Name of person served

```
{ MERGEFIELD  
"FW_RES2_FW_RES2_TITLE" } {  
MERGEFIELD  
"FW_RES2_FW_RES2_FNAME" } {  
MERGEFIELD  
"FW_RES2_FW_RES2_SNAME" }
```

Address of service

```
{ MERGEFIELD  
"FW_RES2_FW_RES2_ADD1" \f" "  
{ MERGEFIELD  
"FW_RES2_FW_RES2_ADD2" \f" "  
{ MERGEFIELD  
"FW_RES2_FW_RES2_TOWN" \f" "  
{ MERGEFIELD  
"FW_RES2_FW_RES2_COUNTY" \f" "  
{ MERGEFIELD  
"FW_RES2_FW_RES2_PCODE" \f" "
```

Date of service

```
{ MERGEFIELD  
FW_NOTIFY2_FW_NOTIFY2_NOT1 }
```

Method of service

```
{ FORMCHECKBOX } 1st class post {  
FORMCHECKBOX } fax
```

```
{ FORMCHECKBOX } in person {  
FORMCHECKBOX } other electronic means
```

```
{ FORMCHECKBOX } DX {  
FORMCHECKBOX } permitted address
```

```
{ FORMCHECKBOX } alternative method as  
directed by court order
```

3. Name of person served

```
{ MERGEFIELD  
"FW_RES3_FW_RES3_TITLE" } {  
MERGEFIELD  
"FW_RES3_FW_RES3_FNAME" } {  
MERGEFIELD  
"FW_RES3_FW_RES3_SNAME" }
```

Address of service

Date of service

```
{ MERGEFIELD  
FW_NOTIFY3_FW_NOTIFY3_NOT1 }
```

Method of service

```
{ FORMCHECKBOX } 1st class post {  
FORMCHECKBOX } fax
```

```
{ FORMCHECKBOX } in person {  
FORMCHECKBOX } other electronic means
```

```
{ FORMCHECKBOX } DX {
```

{ MERGEFIELD
"FW_RES3_FW_RES3_ADD1" \f" "
{ MERGEFIELD
"FW_RES3_FW_RES3_ADD2" \f" "
{ MERGEFIELD
"FW_RES3_FW_RES3_TOWN" \f" "
{ MERGEFIELD
"FW_RES3_FW_RES3_COUNTY" \f" "
{ MERGEFIELD
"FW_RES3_FW_RES3_PCODE" \f" "

FORMCHECKBOX } permitted address
{ FORMCHECKBOX } alternative method as
directed by court order

4. Name of person served

{ MERGEFIELD
"FW_RES4_FW_RES4_TITLE" } {
MERGEFIELD
"FW_RES4_FW_RES4_FNAME" } {
MERGEFIELD
"FW_RES4_FW_RES4_SNAME" }

Date of service

{ MERGEFIELD
FW_RES4_FW_RES4_NOT1 }

Method of service

{ FORMCHECKBOX } 1st class post {
FORMCHECKBOX } fax

Address of service

{ MERGEFIELD
FW_RES4_FW_RES4_ADD1 \f" "
{ MERGEFIELD
"FW_RES4_FW_RES4_ADD2" \f" "
{ MERGEFIELD
"FW_RES4_FW_RES4_TOWN" \f" "
{ MERGEFIELD
"FW_RES4_FW_RES4_COUNTY" \f" "
{ MERGEFIELD
"FW_RES4_FW_RES4_PCODE" \f" "

{ FORMCHECKBOX } in person {
FORMCHECKBOX } other electronic means

{ FORMCHECKBOX } DX {
FORMCHECKBOX } permitted address

{ FORMCHECKBOX } alternative method as
directed by court order

Section 3 – People notified Please photocopy this sheet before use if additional people need to be notified

I have given notice of issue of application form (COP15) to the following:

1. Name of person notified

{ MERGEFIELD
"FW_NTFY_FW_NTFY1_TITLE" } {
MERGEFIELD
"FW_NTFY_FW_NTFY1_FNAME" } {
MERGEFIELD
"FW_NTFY_FW_NTFY1_SNAME" }

Date of notification

{ MERGEFIELD
FW_NTFY_FW_NTFY1_NOT1 }

Method of notification

{ FORMCHECKBOX } 1st class post {
FORMCHECKBOX } fax

Address of notification

{ MERGEFIELD
"FW_NTFY_FW_NTFY1_ADD1" \f" "
{ MERGEFIELD
"FW_NTFY_FW_NTFY1_ADD2" \f" "
{ MERGEFIELD
"FW_NTFY_FW_NTFY1_TOWN" \f" "
{ MERGEFIELD
"FW_NTFY_FW_NTFY1_COUNTY" \f" "
{ MERGEFIELD
"FW_NTFY_FW_NTFY1_PCODE" \f" "

{ FORMCHECKBOX } in person {
FORMCHECKBOX } other electronic means

{ FORMCHECKBOX } DX {
FORMCHECKBOX } permitted address

{ FORMCHECKBOX } alternative method as
directed by court order

2. Name of person notified

{ MERGEFIELD
"FW_NTFY2_FW_NTFY2_TITLE" } {
MERGEFIELD
"FW_NTFY2_FW_NTFY2_FNAME" } {
MERGEFIELD
"FW_NTFY2_FW_NTFY2_SNAME" }

Date of notification

{ MERGEFIELD
FW_NTFY2_FW_NTFY2_NOT1 }

Method of notification

{ FORMCHECKBOX } 1st class post {
FORMCHECKBOX } fax

Address of notification

{ MERGEFIELD
"FW_NTFY2_FW_NTFY2_ADD1" \f" "
{ MERGEFIELD
"FW_NTFY2_FW_NTFY2_ADD2" \f" "
{ MERGEFIELD
"FW_NTFY2_FW_NTFY2_TOWN" \f" "
{ MERGEFIELD
"FW_NTFY2_FW_NTFY2_COUNTY" \f" "
{ MERGEFIELD
"FW_NTFY2_FW_NTFY2_PCODE" \f" "

{ FORMCHECKBOX } in person {
FORMCHECKBOX } other electronic means

{ FORMCHECKBOX } DX {
FORMCHECKBOX } permitted address

{ FORMCHECKBOX } alternative method as
directed by court order

3. Name of person notified

{ MERGEFIELD
"FW_NTFY3_FW_NTFY3_TITLE" } {
MERGEFIELD
"FW_NTFY3_FW_NTFY3_FNAME" } {
MERGEFIELD
"FW_NTFY3_FW_NTFY3_SNAME" }

Date of notification

{ MERGEFIELD
FW_NTFY3_FW_NTFY3_NOT1 }

Method of notification

{ FORMCHECKBOX } 1st class post {
FORMCHECKBOX } fax

Address of notification

{ FORMCHECKBOX } in person {
FORMCHECKBOX } other electronic means

{ FORMCHECKBOX } DX {

{ MERGEFIELD
"FW_NTFY3_FW_NTFY3_ADD1" \f" "
{ MERGEFIELD
"FW_NTFY3_FW_NTFY3_ADD2" \f" "
{ MERGEFIELD
"FW_NTFY3_FW_NTFY3_TOWN" \f" "
{ MERGEFIELD
"FW_NTFY3_FW_NTFY3_COUNTY" \f" "
{ MERGEFIELD
"FW_NTFY3_FW_NTFY3_PCODE" \f" "

FORMCHECKBOX } permitted address
{ FORMCHECKBOX } alternative method as
directed by court order

4. Name of person notified

{ MERGEFIELD
"FW_NTFY4_FW_NTFY4_TITLE" } {
MERGEFIELD
"FW_NTFY4_FW_NTFY4_FNAME" } {
MERGEFIELD
"FW_NTFY4_FW_NTFY4_SNAME" }

Date of notification

{ MERGEFIELD
FW_NTFY4_FW_NTFY4_NOT1 }

Method of notification

{ FORMCHECKBOX } 1st class post {
FORMCHECKBOX } fax

Address of notification

{ MERGEFIELD
"FW_NTFY4_FW_NTFY4_ADD1" \f" "
{ MERGEFIELD
"FW_NTFY4_FW_NTFY4_ADD2" \f" "
{ MERGEFIELD
"FW_NTFY4_FW_NTFY4_TOWN" \f" "
{ MERGEFIELD
"FW_NTFY4_FW_NTFY4_COUNTY" \f" "
{ MERGEFIELD
"FW_NTFY4_FW_NTFY4_PCODE" \f" "

{ FORMCHECKBOX } in person {
FORMCHECKBOX } other electronic means

{ FORMCHECKBOX } DX {
FORMCHECKBOX } permitted address

{ FORMCHECKBOX } alternative method as
directed by court order

Section 4 – Non-service/Non-notification

I could not serve/give notice to:

1. Name

{ FORMTEXT }

Reason:

{ FORMTEXT }

2. Name

{ FORMTEXT }

Reason:

{ FORMTEXT }

3. Name

{ FORMTEXT }

Reason:

{ FORMTEXT }

Section 5 - Statement of truth

The statement of truth is to be signed by you, your solicitor or your litigation friend.

*(I believe) The applicant believes that the facts stated in this annex are true.

Signed

Date

{	{	{	{	{	{	{	{
FO	FO	FO	FO	FO	FO	FO	FO
RM	RM	RM	RM	RM	RM	RM	RM
TE	TE	TE	TE	TE	TE	TE	TE
XT	XT	XT	XT	XT	XT	XT	XT
}	}	}	}	}	}	}	}

Name
 { IF { MERGEFIELD FW_INSTR_FW_APP_SRV1 } = "Yes" "{ MERGEFIELD CALCULATION_FEE_EARNER_DESCRIPTION }" "{ MERGEFIELD FW_APP1_FW_A1_TITLE } { MERGEFIELD FW_APP1_FW_A1_FNAME } { MERGEFIELD FW_APP1_FW_A1_SNAME }" }

Name of firm
 { IF { MERGEFIELD FW_INSTR_FW_APP_SRV1 } = "Yes" "{ MERGEFIELD PRACTICEINFO_PRACTICE_NAME }" "" }

Position or office held
 { IF { MERGEFIELD FW_INSTR_FW_APP_SRV1 } = "Yes" "{ MERGEFIELD CALCULATION_STATUS_DESCRIPTION }" "" }

Note:

No other forms need to be attached with this form. However, it may assist the court if your completed **COP20A** and **COP20B** could be returned at the same time.

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