

# Variation of Standard Directions Pursuant to Practice Direction 2

## 1 – Application Details

Case Number / Name:

Date of Application:

Nature of Application:

Date of next hearing:

Relevant Documents:

Variation sought:

Liberty to apply

We confirm the following:

- I. Each party agrees the terms of the variation sought.
- II. The variation will not cause the date of the CMH (if one is listed) nor the date of the substantive hearing to be altered, amended or vacated.
- III. The parties have submitted their request on the prescribed form with a draft of the directions as amended.

For the Applicant

For the Respondent / Legal Representative

Name:

Name:

Signature:

Signature:

Date of variation:

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### For Multiple Respondents - if applicable

For the Respondent / Legal Representative

Name:

Signature:

For the Respondent / Legal Representative

Name:

Signature:

For the Respondent / Legal Representative

Name:

Signature:

For the Respondent / Legal Representative

Name:

Signature: