COMMISSION DECISION
of 26 August 2005

(2005/630/EC)

THE COMMISSION OF THE EUROPEAN COMMUNITIES,

Having regard to the Treaty establishing the European Community,

Having regard to Council Directive 2003/8/EC of 27 January 2003 to improve access to justice in cross-border disputes by establishing minimum common rules relating to legal aid for such disputes (1), in particular Article 16(1) thereof,

After consulting the committee established by Article 17 of Directive 2003/8/EC,

Whereas:


(2) Under Directive 2003/8/EC the Commission should also establish a standard form to facilitate the transmission of legal aid applications between the judicial authorities of the Member States.

(3) Under Articles 1 and 2 of the Protocol on the position of Denmark, annexed to the Treaty on European Union and the Treaty establishing the European Community, Denmark did not participate in the adoption of Directive 2003/8/EC and is accordingly neither bound by it nor required to give effect to it,

HAS DECIDED AS FOLLOWS:

Sole Article

The standard form for the transmission of legal aid applications set out in the Annex to this Decision is adopted.

Done at Brussels, 26 August 2005.

For the Commission
Franco FRATTINI
Vice-President

ANNEX

STANDARD FORM

Form for the transmission of a legal aid application

Special reasons, if any, for requesting urgent action on this application

Dossier reference: ____________________________________________________________

Dossier transmitted by: _________________________ Date of transmission: ______________

<table>
<thead>
<tr>
<th>Details of the transmitting authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of the transmitting authority:</td>
</tr>
<tr>
<td>Member State:</td>
</tr>
<tr>
<td>Person responsible for the dossier:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>Telephone:</td>
</tr>
<tr>
<td>Fax:</td>
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<tr>
<td>Email:</td>
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</tbody>
</table>

To:

<table>
<thead>
<tr>
<th>Details of the receiving authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Member State:</td>
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<tr>
<td>Address:</td>
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<tr>
<td>Telephone:</td>
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<tr>
<td>Fax:</td>
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<tr>
<td>Email:</td>
</tr>
</tbody>
</table>
Details of the person or company applying for legal aid

Full name of person or company name: ............................................................................................................

Name and forename of person representing the applicant if the applicant is a minor or under incapacity: ............

Name and forename of person representing the applicant if the applicant is of full age and not under incapacity (solicitor
agent, ...): ......................................................................................................................................................

Address: ...........................................................................................................................................................

...............................................................................................................................................................

Telephone: ........................................................................................................................................................

Fax: ......................................................................................................................................................................

Email: ...............................................................................................................................................................  

Languages: ........................................................................................................................................................

Details of the procedure

1. Is the legal aid applicant the plaintiff or defendant?

2. Does the legal aid applicant want this aid in order to obtain:

(a) pre-litigation advice .................................................................................................................................. C

(b) assistance (advice and/or representation) within the framework of extrajudicial procedures ................. C

(c) assistance (advice and/or representation) within the framework of envisaged legal proceedings ............. C

(d) assistance (advice and/or representation) within the framework of ongoing legal proceedings ............... C

If yes:

— Registration number: .................................................................................................................................

— Dates of hearings: ......................................................................................................................................

— Name of the court: ....................................................................................................................................

— Address of the court: .................................................................................................................................

(e) obtain advice and/or representation within the framework of legal proceedings relating to a decision which has
already been taken by a judicial authority? .................................................................................................. C
If yes:

— Name and address of the judicial authority: .................................................................

— Date of the decision: ..................................................................................................

— Nature of the case: ....................................................................................................

— Appeal against the decision ................................................................. O

— Enforcement of the decision ................................................................. O

3. Opposing party: ...........................................................................................................

4. Brief description of the nature of the case, including, in cases mentioned at point 2(a), (b) and (c), information that will help to identify the court probably having jurisdiction: .................................................................

ACKNOWLEDGMENT OF RECEIPT

The receiving authority

Name: ..........................................................................................................................

Member State: ............................................................................................................... 

Dossier reference: ....................................................................................................... 

Received on: ................................................................................................................

Person responsible for the dossier: .............................................................................

Address: ......................................................................................................................

Telephone: ................................................................................................................

Fax: ............................................................................................................................

Email: .........................................................................................................................

If applicable, dossier transmitted to:

Name: ..........................................................................................................................

Person responsible for the dossier: .............................................................................

Address: ......................................................................................................................

Telephone: ................................................................................................................

Fax: ............................................................................................................................

Email: .........................................................................................................................
Acknowledgement of receipt of dossier transmitted by

The transmitting authority

Name: ..............................................................................................................................

Member State: ....................................................................................................................

Dossier reference: ..........................................................................................................

Person responsible for the dossier: ..................................................................................

Done at: ......................................................................................................................... Date: ....................................................................................................................

Signature: ......................................................................................................................