

Capacity Application (Form 55A)

Record Number:

Circuit County

Applicant to complete:		
In the Matter of Part 5 of the Assiste	ed Decision - Making (Capacity) Act 2015, as amended	
A	nd In the Matter of	
Relevant Person:		
	Application of	
Applicant 1:		
Applicant 2 (if applicable):		
Court Office to complete:		
TAKE NOTICE that on		
Date of Hearing:	at Time:	
Court Venue:		
the applicant will apply for orders as set out in this document:		

COURT FEE

Applicant to complete:	
A) Party Details:	
Relevant Person	
First Name:	Surname:
Address Line 1:	
Address Line 2:	
Town:	County:
Eircode / Postcode:	Country:
Applicant 1	C.,,,,,
First Name:	Surname:
Address Line 1:	
Address Line 2:	
Town:	County:
Eircode / Postcode:	Country:
Email Address (optional):	
Contact Number (optional):	
Applicant 2 (if applicable)	
First Name:	Surname:
Address Line 1:	
Address Line 2:	
Town:	County:
Eircode / Postcode:	Country:
Email Address (optional):	
Contact Number (optional):	

	time this application is made, the relevant per	son (please select one):
F	Resides in this Circuit	
C	Carries on business in this Circuit, please pro	vide address below
F	Has resided in this Circuit at any time during t	he last 3 years, please provide address below
Specify wh	which of the following orders are intended to	o be sought
B) Wha	at declarations are you applying for? (Tick	all that apply)
а	A declaration under Section 37(1)(a), that the assistance of a suitable person as a co-decisi make the below decisions jointly with him / he	on maker is made available to him / her to
	Personal welfare P	roperty and affairs
Please	e give details below	
Please	e give details below	

A declaration under Section 37(1)(b), that the Relevant Person lacks capacity even if the assistance of a suitable person as a co-decison maker were made available to him / her to make the below decisions in relation to his / her:

Personal welfare	Property and affairs
Please give details below	
	(3) of the Act as to the lawfulness of the following televant Person (please give details):
	,

C) Which order are you applying for? (Tick all that apply)
An order under section 38(2)(a) of the Act making the following decision(s) as outlined below, on behalf of the Relevant Person, where the court is satisfied that the matter is urgent or expedient (please give details):
An order under section 38(2)(b) of the Act to appoint a decision-making representative for the Relevant Person for the following decisions (please give details):

An interim order under section 48 of the Act providing for (please give details)
Do you know of a suitable person who would be willing to act as a decision-making representative for the Relevant Person?
If yes, please provide details of this person in Form 55B.
Yes No

D) Additional information: If you need extra space to complete your application, please continue writing your answer below, clearly marking which section of the form you are referring to. You should consider taking legal advice on this document. If you are the Relevant Person to whom this Capacity Application relates (i.e. the person in respect of whom a declaration concerning capacity is sought), you may reply to the application by completing Form 55C (or if you have a solicitor, your solicitor may do so). Copies of the completed form should be sent to the applicant or applicant's solicitor at the address given above and to the Court Office at the address above at least seven days before the hearing date.

You are also free to deliver evidence by affidavit or, if the Court permits, in another manner. If you have a solicitor, he or she can advise you about this. You may attend the hearing in person

and/or your solicitor can attend on your behalf.

E) Signatures:	
Signature of Applicant(s)/ Solicitor for Applicant(s):	
Date (DD/MM/YYYY):	
Solicitor Details (if applicable)	
Name of Solicitor:	
Name and Address of Legal Firm:	
Solicitor Email:	
Solicitor Phone Number:	
<u>F) To:</u>	
Name and Address of	
Name and Address of	
Name and Address of Court office: Name and Address of Notice	
Name and Address of Court office:	
Name and Address of Court office: Name and Address of Notice	
Name and Address of Court office: Name and Address of Notice Party 1 (if applicable): Name and Address of Notice	
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