



Ex-Parte Consent Application Notice of Motion (Form 55G)

Record Number:

Circuit

County

Applicant to complete:

In the Matter of the Assisted Decision - Making (Capacity) Act 2015, as amended

Part:

Section:

And 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, and for such further or other orders as the Court is empowered to make under said Act.

COURT FEE
STAMP AREA

Applicant to complete:

A) Party Details:

Relevant Person

First Name:

Surname:

Address Line 1:

Address Line 2:

Town:

County:

Eircode / Postcode:

Country:

Applicant 1

First Name:

Surname:

Address Line 1:

Address Line 2:

Town:

County:

Eircode / Postcode:

Country:

Email Address:

Contact Number:

Applicant 2 (if applicable)

First Name:

Surname:

Address Line 1:

Address Line 2:

Town:

County:

Eircode / Postcode:

Country:

Email Address:

Contact Number:

B) Affidavit Details

WHICH application will be grounded upon the following affidavit(s) and the nature of the case and the reasons to be offered:

Affidavit of:

Sworn on (date):

C) Details of Order(s) requested

D) Signature:

Signature of Applicant/
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:

E) To:

Name and Address of
Court office: