

Claim No.

**IN THE HIGH COURT OF JUSTICE OF THE ISLE OF MAN
CIVIL DIVISION**

	PROCEDURE
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Parties	
<div style="border: 1px solid black; height: 80px; margin-bottom: 20px;"></div>	Claimant(s)
<div style="border: 1px solid black; height: 80px;"></div>	Defendant(s)

If there is more than one claimant/defendant please enter the full name of the claimant/defendant filing this form:

[Claimant] [Defendant]'s statement of costs for hearing on <small>delete as appropriate</small>	
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Details of fee earner(s) and hourly rate(s) claimed				
Name	Description		£	£
			£	£
Attendances on client		hours at		
		hours at		
Attendances on opponent		hours at		
		hours at		

Attendances on others		hours at		
		hours at		
Site inspections etc.		hours at		
		hours at		
Work done on negotiations		hours at		
		hours at		
Other work not covered above		hours at		
		hours at		
Work done on documents		hours at		
		hours at		
Interlocutory applications (specify individually)				
		hours at		
		hours at		
		hours at		
Preparation for hearing		hours at		
		hours at		
Attendance at hearing		hours at		
		hours at		
Travel and waiting time		hours at		
		hours at		
Disbursements (see separate sheet)				
Sub-total				

VAT claimed on	advocates' fees	
	disbursements	
Total		
Date	Signed (type or print full name here)	
Name and address in the Isle of Man (including post code)	Telephone no.	
	Fax no. (if appropriate)	
	E-mail (if appropriate)	
	Reference (if any)	