

# Judicial Review Claim Form

Notes for guidance are available which explain how to complete the judicial review claim form. Please read them carefully before you complete the form.

For Court use only	
Administrative Court Reference No.	C0/5003/2017
Date filed	20.10.17

In the High Court of Justice Administrative Court	
Help with Fees - Ref no. (if applicable)	HWF - [ ] - [ ] - [ ] - [ ]



Is your claim in respect of refusal of an application for fee remission?  Yes  No

## SECTION 1 Details of the claimant(s) and defendant(s)

Claimant(s) name and address(es)

**name**  
Walter Hugh Merricks CBE

**address**  
32 Cholmeley Crescent  
London  
N6 5HA

**Telephone no.** [ ] **Fax no.** [ ]

**E-mail address** [ ]

Claimant's or claimant's legal representatives' address to which documents should be sent.

**name**  
Quinn Emanuel Urquhart & Sullivan UK LLP

**address**  
90 High Holborn  
London  
WC1V 6LJ

**Telephone no.** 020 7653 2090 **Fax no.** 020 7653 2100

**E-mail address**  
borisbronfentrinker@quinnemanuel.com

Claimant's Counsel's details

**name**  
Paul Harris QC; Marie Demetriou QC Victoria Wakefield; Emma Mockford

**address**  
Monckton Chambers  
1 & 2 Raymond Buildings  
Gray's Inn  
London  
WC1R 5NR

Brick Court Chambers  
7-8 Essex Street  
London  
WC2R 3LD

**Telephone no.** [ ] **Fax no.** [ ]

**E-mail address** [ ]

1st Defendant

**name**  
Competition Appeal Tribunal

Defendant's or (where known) Defendant's legal representatives' address to which documents should be sent.

**name** [ ]

**address**  
Victoria House  
Bloomsbury Place  
London  
WC1A 2EB

**Telephone no.** 020 7979 7979 **Fax no.** 020 7979 7978

**E-mail address** [ ]

2nd Defendant

**name** [ ]

Defendant's or (where known) Defendant's legal representatives' address to which documents should be sent.

**name** [ ]

**address** [ ]

**Telephone no.** [ ] **Fax no.** [ ]

**E-mail address** [ ]

## SECTION 2 Details of other interested parties

Include name and address and, if appropriate, details of DX, telephone or fax numbers and e-mail

<b>name</b> (1) Mastercard Incorporated; (2) Mastercard International Incorporated	<b>name</b> (3) Master Europe S.P.R.L
<b>address</b> 2000 Purchase Street Purchase New York 10577 United States of America	<b>address</b> Chausée de Tervuren B-1410 Waterloo Belgium
<b>Telephone no.</b>	<b>Telephone no.</b>
<b>Fax no.</b>	<b>Fax no.</b>
<b>E-mail address</b>	<b>E-mail address</b>

## SECTION 3 Details of the decision to be judicially reviewed

**Decision:**  
Walter Hugh Merricks CBE v (1) Mastercard Incorporated (2) Mastercard International Incorporated (3) Mastercard Europe S.P.R.L. [2017] CAT 16

**Date of decision:**  
21 July 2017

Name and address of the court, tribunal, person or body who made the decision to be reviewed.

<b>name</b> Competition Appeal Tribunal	<b>address</b> Victoria House Bloomsbury Place London WC1A 2EB
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## SECTION 4 Permission to proceed with a claim for judicial review

I am seeking permission to proceed with my claim for Judicial Review.

Is this application being made under the terms of Section 18 Practice Direction 54 (Challenging removal)?

Yes  No

Are you making any other applications? If Yes, complete Section 8.

Yes  No

Is the claimant in receipt of a Civil Legal Aid Certificate?

Yes  No

Are you claiming exceptional urgency, or do you need this application determined within a certain time scale? If Yes, complete Form N463 and file this with your application.

Yes  No

Have you complied with the pre-action protocol? If No, give reasons for non-compliance in the box below.

Yes  No

As the Claimant is seeking judicial review of a judgment of the Competition Appeal Tribunal, he considers that compliance with the pre-action protocol is not appropriate. In any event, the Tribunal is aware that the Claimant is seeking review of the judgment through all possible avenues as the Claimant applied to the Tribunal for permission to appeal its judgment on 10 August 2017. The Tribunal rejected that application on 28 September 2017 on the basis that there was no right of appeal, meaning that the Claimant has to pursue a judicial review.

Have you issued this claim in the region with which you have the closest connection? (Give any additional reasons for wanting it to be dealt with in this region in the box below). If No, give reasons in the box below.

Yes  No

Does the claim include any issues arising from the Human Rights Act 1998?  
If Yes, state the articles which you contend have been breached in the box below.

Yes  No

**SECTION 5 Detailed statement of grounds**

set out below  attached

**SECTION 6 Aarhus Convention claim**

I contend that this claim is an Aarhus Convention claim

Yes  No

If Yes, indicate in the following box if you do not wish the costs limits under CPR 45.43 to apply.

If you have indicated that the claim is an Aarhus claim set out the grounds below, including (if relevant) reasons why you want to vary the limit on costs recoverable from a party.

**SECTION 7 Details of remedy (including any interim remedy) being sought**

The Claimant seeks an order that the judgment of the Competition Appeal Tribunal be quashed.

The Claimant also seeks an order that the Court exercise its power under section 31(5A) of the Senior Courts Act 1981 to substitute its view for that of the Tribunal and grant the application for a Collective Proceedings Order.

The Claimant further seeks an order that the Interested Parties pay the Claimant's costs of the judicial review proceedings.

**SECTION 8 Other applications**

Out of an abundance of caution, and to the extent necessary, the Claimant seeks permission to reply upon the supplemental expert report of Dr Cento Veljanovski and Mr David Dearman. In support of that application, the Claimant relies upon the matters set out in the attached witness statement of Boris Bronfentrinker. In particular, the Supplemental Report is necessary for the just resolution of these judicial review proceedings. The Interested Parties have indicated in correspondence that they may object to the Claimant's reliance on such evidence. Should the Interested Parties so object, the Claimant will respectfully seek directions to make submissions in response should that assist the Court.

Given that the present application is being made in parallel with an application to the Court of Appeal for permission to appeal, the Claimant also applies for directions to the effect that:

- (1) the present application for judicial review be listed for a 'rolled up' hearing before a three-judge Divisional Court;
- (2) that the same three-judge Court shall sit simultaneously as a Court of Appeal;
- (3) that the Court should first hear argument on the threshold question as to the existence of a statutory right of appeal, followed by argument as to the substantive merits of the Claimant's judicial review application (and the identical arguments on the substantive merits of the Claimant's appeal); and
- (4) judgment may then be given by the Court, either in its capacity as a Divisional Court, or as a Court of Appeal, depending on its decision in respect of the existence of a statutory right of appeal.

**SECTION 9 Statement of facts relied on**

This is set out in the attached Statement of Facts and Grounds.

**Statement of Truth**

The claimant believes that the facts stated in this claim form are true.

Full name: Boris Bronfentrinker

Name of claimant's solicitor's firm: Quinn Emanuel Urquhart & Sullivan UK LLP

Signed   
Claimant's solicitor

Position or office held: Partner  
(if signing on behalf of firm or company)

## SECTION 10 Supporting documents

If you do not have a document that you intend to use to support your claim, identify it, give the date when you expect it to be available and give reasons why it is not currently available in the box below.

Please tick the papers you are filing with this claim form and any you will be filing later.

- |  |                                   |  |
|--|-----------------------------------|--|
| <input checked="" type="checkbox"/> Statement of grounds   | <input type="checkbox"/> included | <input checked="" type="checkbox"/> attached |
| <input checked="" type="checkbox"/> Statement of the facts relied on   | <input type="checkbox"/> included | <input checked="" type="checkbox"/> attached |
| <input type="checkbox"/> Application to extend the time limit for filing the claim form  | <input type="checkbox"/> included | <input type="checkbox"/> attached            |
| <input type="checkbox"/> Application for directions  | <input type="checkbox"/> included | <input type="checkbox"/> attached            |
| <input checked="" type="checkbox"/> Any written evidence in support of the claim or application to extend time   |                                   |  |
| <input checked="" type="checkbox"/> Where the claim for judicial review relates to a decision of a court or tribunal, an approved copy of the reasons for reaching that decision |                                   |  |
| <input checked="" type="checkbox"/> Copies of any documents on which the claimant proposes to rely   |                                   |  |
| <input type="checkbox"/> A copy of the legal aid or Civil Legal Aid Certificate <i>(if legally represented)</i>  |                                   |  |
| <input checked="" type="checkbox"/> Copies of any relevant statutory material  |                                   |  |
| <input checked="" type="checkbox"/> A list of essential documents for advance reading by the court <i>(with page references to the passages relied upon)</i>                     |                                   |  |
| <input type="checkbox"/> Where a claim relates to an Aarhus Convention claim, a schedule of the claimant's financial resources.  | <input type="checkbox"/> included | <input type="checkbox"/> attached            |

If Section 18 Practice Direction 54 applies, please tick the relevant box(es) below to indicate which papers you are filing with this claim form:

- |  |                                   |                                   |
|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> a copy of the removal directions and the decision to which the application relates  | <input type="checkbox"/> included | <input type="checkbox"/> attached |
| <input type="checkbox"/> a copy of the documents served with the removal directions including any documents which contains the Immigration and Nationality Directorate's factual summary of the case | <input type="checkbox"/> included | <input type="checkbox"/> attached |
| <input type="checkbox"/> a detailed statement of the grounds   | <input type="checkbox"/> included | <input type="checkbox"/> attached |

Reasons why you have not supplied a document and date when you expect it to be available:-

Signed \_\_\_\_\_ Claimant ('s Solicitor) \_\_\_\_\_