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| --- | --- |
| **File Opening Form** |  |
| **UFN (legal aid only)** |  | **File ref** |  |
| **Opened by** |  | **Date opened** |  |

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| --- |
| Client Details |
| Name |  |
| Address |  | N.I No (legal aid only) |  |
|  |  | Date of birth |  |
|  |  | Tel (home) |  |
|  |  | Tel (work) |  |
| Postcode |  | Tel (mobile)  |  |
| Client type |[ ]  New  |[ ]  Existing | Email |  |

|  |
| --- |
| Matter Details |
| Case Type |  |
| Funding type |[ ]  Private |[ ]  Legal aid |
| Fixed fee/estimate: | £ |
| Fee earner |  | Supervisor |  |
| Opponent/other partiesfor conflict check |  |
| Conflict check clear |[ ]  Yes |[ ]  No | Checked by (initials)  |  | Date |  |
| Initial Risk Assessment by fee earner  |[ ]  Ordinary |[ ]  High (Risk Notice to be raised) |
| Matter satisfies ‘costs v benefits’ test  |[ ]  Yes |[ ]  No |[ ]  N/A |
| Client ID |[ ]  Requested |[ ]  Provided |[ ]  N/A**(please provide reasons below)** |
|  |  |
| Any special client instructions/ information |  |