

New Client Enquiry Form

Email to:
Enquiries@hallidayreeves.com or
fax to 0844 811 2148



Date:

Client Details:	
Last Name:	Date of Birth:
First Names:	Nationality:
Address:	Current Leave Type:
Telephone:	Expiry date:
Email:	NI Number:
Preferred method of contact:	
Proof of ID : [e.g. passport, travel document, status documents, birth certificate]	
Case Enquiry- what type of application? [e.g. business, family , etc]	Deadlines or Key Dates: [expiry of leave, court date etc]
Summary: [please give as many details as possible]	
Copies of relevant documents: [Please name and attach any to form]	
1.	
2.	
3.	

Client Declaration:

1. I consent to my case details being referred to Halliday Reeves Law Firm with any relevant case notes or documents.
2. I have confirmed my preferred method of contact is by email and that I will check it regularly * delete if not applicable

Signed:

Date:

Income and evidence for public funded cases:

I am in receipt of any of the following? Please circle

Income Support

Income based JSA or ESA

Nil Income

Guaranteed Pension Credits

Tax Credits / DLA / HB / CTB

Wage [weekly value]

Other:

NB

Evidence of income for past calendar month required

We WILL NOT be able to assist if we have advised in last 3 months. This is a Pro Bono drop in to assist people who have not had the benefit of recent advice from us on the same matter

Referrer's details:

Agency Name:

Contact Name:

Office Address:

Telephone:

Email:

For office use only:

Fee Earner Ref:

Time spent:

File Number:

Comments: