



## INFORMATION IN SUPPORT OF AN APPLICATION FOR WARRANT TO ENTER PREMISES AND REMOVE PERSON

**Mental Health Act 1983. Section 135(1)**

Court code: *[insert]*

Court office address: *[insert]*

Telephone number: *[insert]*

Any queries regarding this document should be  
directed to the Legal Support Team, Essex  
Magistrates' Court, PO Box 10754, Chelmsford,  
CM1 9PZ

**Date:**

Specify name of applicant	THE INFORMATION of
Applicants telephone number	Please call on this number at the time of the hearing
Applicants secure email address	Please email the warrant to the following secure email address
Booking code	Team Up booking reference
Address of applicant	
Specify name of Local Authority/agency	an officer of            appointed to as an Approved Mental Health Professional for the purposes of the Mental Health Act 1983 who states that there is reasonable cause to believe that
Specify name of subject	a person believed to be suffering from a mental disorder
Insert grounds for application	a) Has been, or is being, ill treated, neglected or kept otherwise than under proper control, or b) Being unable to care for himself/ herself, is living alone. <i>(please delete as appropriate)</i>
Insert address of premises	
	APPLICATION IS HEREBY MADE for a warrant under Section 135(1) of the Mental Health Act 1983 authorising any constable entry to the said premises, if need be by force and, if thought fit, to remove the person named above to a place of safety as defined by Section 135(6) of the said Act with a view to the making of an application in respect of that person under Part II of the Acts or making other arrangements for his care
State relevant information in support of the application	

Time estimate	I estimate the court should allow _____ minutes to read this application and _____ minutes for the hearing.
Planned date to be executed	I expect any warrant to be executed on _____ (give planned date)
Fee	I have paid the relevant fee of £75 and my payment reference is _____. Or I have been unable to pay because _____ and I have attached a signed undertaking form.
Declaration and signature by informant	I am authorised to make this application and confirm that to the best of my knowledge and belief the application discloses all the information that is material to what the court must decide, including anything that might reasonably be considered capable of undermining any of the grounds of the application.  Signed: _____ Approved Mental Health Professional
	The applicant satisfied me about his or her entitlement to make the application. The applicant confirmed on oath or affirmation the declaration. The applicant gave me additional information, the essence of which was:       I [issued] [refused to issue] a warrant because:   Dated the _____ Signed : _____ Justice of the Peace