

Application notice

For help in completing this form please read the notes for guidance form N244Notes.

Name of court CHESTER MAGISTRATES	Claim no. TWD180703
Fee account no. (if applicable)	Help with Fees – Ref. no. (if applicable)
BENEFITS ONLY	H W F - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>
Warrant no. (if applicable)	
Claimant's name (including ref.) TOM DOBBIE	
Defendant's name (including ref.) CHESHIRE POLICE	
Date	3RD JULY 2018

1. What is your name or, if you are a legal representative, the name of your firm?

TOM DOBBIE - LITIGANT IN PERSON

2. Are you a Claimant Defendant Legal Representative
 Other (please specify)

If you are a legal representative whom do you represent?

SELF

3. What order are you asking the court to make and why?

1. TO PUT IN PLACE AN INJUNCTION TO STOP CHESHIRE POLICE INTERFERING WITH THE COURSE OF JUSTICE. 2. TO PUT IN PLACE AN INJUNCTION TO STOP CHESHIRE POLICE HARASSING, TORTURING AND UNNECESSARILY DISTRESSING TOM DOBBIE

4. Have you attached a draft of the order you are applying for? Yes No

5. How do you want to have this application dealt with?
 at a hearing without a hearing
 at a telephone hearing

6. How long do you think the hearing will last?
 Hours Minutes
 Is this time estimate agreed by all parties? Yes No

7. Give details of any fixed trial date or period

8. What level of Judge does your hearing need?

HIGH COURT

9. Who should be served with this application?

CHIEF CONSTABLE OF CHESHIRE

9a. Please give the service address, (other than details of the claimant or defendant) of any party named in question 9.

CHESHIRE CONSTABULARY
 HEADQUARTERS
 CLEMONDS HEY
 OAKMERE ROAD
 WINSFORD
 CW7 2UA

10. What information will you be relying on, in support of your application?

- the attached witness statement
 the statement of case
 the evidence set out in the box below

If necessary, please continue on a separate sheet.

1. CHESHIRE POLICE HAVE CAUSED TOM DOBBIE TO BE SO DISTRESSED AND ANXIOUS THAT HE SUFFERS FROM SIGNIFICANT PSYCHIATRIC DISTRESS - ICD10:F43 AT BATTLE FATIGUE LEVEL. THIS IS REPORTED BY THE PSYCHIATRISTS AS CAUSED BY THE ABUSE OF TOM DOBBIE AND HIS CHILDREN - BY THE AUTHORITIES (CHESHIRE POLICE, CHESHIRE WEST AND CHESTER SOCIAL SERVICES).
2. CHESHIRE POLICE HAVE REPEATEDLY MADE HARASSMENTS, THEFT, BURGLARY AND THREATS TO KILL TO TOM DOBBIE. THEY HAVE ALSO THREATENED HIS DAUGHTER NOT TO SPEAK OUT.
3. CHESHIRE POLICE HAVE REPEATEDLY CAUSED UNNECESSARY DISTRESS AND ANXIETY IN THE WAY THEY HAVE TREATED TOM DOBBIE AT A LEVEL THAT MEETS THE CRITERIA FOR TORTURE. TOM DOBBIE HAS REPEATEDLY OFFERED TO SIT DOWN AND PRESENT OR DISCUSS ANY AND ALL ISSUES - ESPECIALLY EVIDENCE. CHESHIRE POLICE REFUSE AND INSTEAD REPEATEDLY ARREST TOM DOBBIE IN A WHOLLY UNNECESSARY WAY TO CAUSE HIM DISTRESS. ARRESTS INCLUDE TITLE LIKE 'HAS MADE A POSSIBLY SINISTER LAUGH'.
4. CHESHIRE POLICE HAVE INTERFERED WITH THE PREPARATION FOR TRIALS IN CHESTER.

Statement of Truth

(I believe) (The applicant believes) that the facts stated in this section (and any continuation sheets) are true.

Signed tom dobbie Dated 3RD JULY 2018
Applicant('s legal representative)('s litigation friend)
Full name THOMAS WILLIAM DOBBIE
Name of applicant's legal representative's firm LITIGANT IN PERSON
Position or office held SELF
(if signing on behalf of firm or company)

11. Signature and address details

Signed tom dobbie Dated 3RD JULY 2018
Applicant('s legal representative)('s litigation friend)
Position or office held SELF
(if signing on behalf of firm or company)

Applicant's address to which documents about this application should be sent

5 DALE MEWS, GAWSWORTH ROAD GREAT SUTTON, ELLESMERE PORT CHESHIRE Postcode <table border="1"><tr><td>C</td><td>H</td><td>6</td><td>6</td><td>3</td><td>T</td><td>E</td></tr></table>	C	H	6	6	3	T	E	If applicable	
	C	H	6	6	3	T	E		
	Phone no.								
	Fax no.								
	DX no.								
Ref no.									

E-mail address ANIMA.TOM.DOBBIE@GMAIL.COM