



## Application for Family or civil legal aid

If you have any questions call 0800 2 LEGAL AID (253 425) or go to: [www.justice.govt.nz/legal-aid](http://www.justice.govt.nz/legal-aid)

### Personal details

**1** Title  Miss  Ms  Mrs  Mr

**2** Full name

**3** Have you ever used another name?  Yes  No

If yes – list your other names used.

**4** Date of birth

**5** Your current address

**6** Your postal address  
(if different from current address)

**7** Mobile phone

**8** Home phone

**9** Work phone

**10** Other contact phone  
Whose number is this?

**11** Email

### Living arrangements

**12** Do you have a partner who lives with you?  Yes  No

If yes – partner's full name:

**13** How many children do you have under 18 years old?  How many of those are living with you?

## Income

### 14 The income you and/or your partner receive:

Note that the following payments are excluded when we are assessing your income: the Accommodation Supplement, Emergency Benefit, Disability Allowance, Special Benefit, Child Disability Allowance, Unsupported Child Benefit and, if either you or your partner are in prison, your partner's income and assets.

	You \$ (before tax)	Partner \$ (before tax)	Frequency (eg weekly/monthly/annual)
<b>Wages or salary</b>			
<b>Employer name, phone, address:</b>			
<b>Business/self employed</b>			
<b>Working for Families Tax Credits</b>			
<b>Income from rent(s)</b>			
<b>Interest or dividends</b>			
<b>Income from a Trust</b> – please also complete questions 15 and 16			
<b>Other</b>			
<b>Pension or benefit:</b>			
1. Jobseeker support			
2. Sole parent benefit			
3. Supported Living Payment			
4. NZ Superannuation			
5. Student Allowance			
6. Other – please tell us what it is			
<b>What is your WINZ number?</b>			

Complete this section if you have an interest in a Trust:

15 Does the Trust owe money to you and/or your partner? Yes  No

How much? \$

16 When will you receive this money?  Don't know

17 If you don't receive an income, how are you financially supported?


## Assets and debts

**18** Do you and/or your partner own or have an interest in a home or land and/or property?

Yes  No

Property address	
Legal owner of property	
Estimated value \$	
Mortgage balance \$	

Is it in a Trust?

Yes  No

Is it registered under the Joint Family Homes Act?

Yes  No

Is it on/or Māori land?

Yes  No

What is your share of ownership of it? (eg 50%)

%

Is it in dispute?

Yes  No

If you and/or your partner have more than one property please provide this information as above on another page.

**19** Do you and/or your partner have any money or investments?

Yes  No

	You \$	Partner \$	Is it in dispute?	
Cash, savings and term deposits			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Shares and bonds			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Retirement funds (not Kiwisaver)			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other – including money owed to you			Yes <input type="checkbox"/>	No <input type="checkbox"/>

**20** Do you and/or your partner have any items that have a resale value of \$3,500 or more? (eg motor vehicles, boats, etc)

Yes  No

Description	Value \$	Amount owing ~ (for vehicles only)	Is it in dispute?	
			Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>

**21** Do you and/or your partner have any debts?

Yes  No

If yes – what is the balance owing?

	You \$	Partner \$	Is it in dispute?	
Bank overdraft or personal debt credit cards			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Fines, tax, student loan			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Hire purchase			Yes <input type="checkbox"/>	No <input type="checkbox"/>
WINZ			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other			Yes <input type="checkbox"/>	No <input type="checkbox"/>

## Other financial information

**22** Are there any other reasons why you can't pay for your own lawyer?


**23** Has any lawyer received any payments (other than legal aid) or entered into any private fee arrangement for work in regards to this matter? If yes – please provide name, work completed and total paid to the lawyer.


## Documents to be attached to this application

**24** Please attach the following:

**Proof of your income** (eg payslip, bank statements, WINZ benefit, income tax statements, Working for Families/or for a business set of latest accounts).

**Proof of your partner's income** (eg payslip, bank statements, WINZ benefit, income tax statements, Working for Families/or for a business set of latest accounts).

**If you have an interest in a Trust please attach:**

a copy of original Trust deed

a copy of latest financial accounts for the Trust.

## Applicant confirmation

**By signing this application form, you agree that:**

You don't have to provide us with information, but if you don't provide all the information requested, your application may not be able to be assessed, or may be declined.

Your application may be refused if you have any debt from a previous legal aid grant.

Personal information about you will be collected and/or disclosed to meet responsibilities under the Legal Services Act 2011 (the Act), associated regulations and/or any other relevant statute or court order. This information may be used for statistical and/or research purposes and in this context will not individually identify you.

You have the right to have access to all information held about you, and to request correction of that information under the Privacy Act 2020.

We will assess your financial means and as a result you may be required to repay some or all of your legal aid. Any assets or property that you own may be subject to a charge to cover some or the entire repayment amount, including any interest charged. This includes any costs or settlements awarded to you.

If you receive or keep any assets, property or money as a result of the case, they are also subject to a charge to cover some or all of your legal aid costs.

Interest will be charged on all outstanding legal aid debt when the case has finished.

**If you don't meet your repayment obligations we may:**

- » send your debt to a third party debt collection agency and add the collection costs to the amount owed and
- » issue a deduction notice to automatically deduct payments from your benefit, employment income or bank account.

**While receiving legal aid or if you have a legal aid debt:**

- » you must let us know immediately if you have changed your address, or if your income or assets change
- » provide updated information about your financial means if we ask.

**It is an offence, (which could result in a conviction or a fine) to:**

- » not answer questions or produce false documents when you are required to do so under the provisions of the Act or associated regulations, without reasonable excuse
- » knowingly provide false and misleading information, or answer any question in a false and misleading way and
- » intentionally avoid payment to legal aid.

**You consent to:**

- » paying your lawyer the legal aid user charge
- » legal aid contacting Work and Income or any other third party to obtain verification of your financial means, benefit income, bank account, employer, address and phone number. This could include Work and Income providing information about your benefit and asking other third parties (including your employer, bank or other income source) to provide the information when asked
- » your information being saved/stored in an electronic and/or physical form (unless you advise us otherwise)
- » you have read and understood the information, rights and responsibilities explained above.

**You confirm that:**

- » the information you have given in this application is true, not misleading, and completed to the best of your knowledge.
- » you have no insurance or indemnification available to cover some or all of your legal costs.

Signature of applicant/representative  Date

[Click View → Fill & Sign → Place Signature](#)

Representative name

Relationship to applicant

**Get more information**

If you need help filling in this form, please contact your lawyer. If you don't have a lawyer, you can search the 'Find a lawyer' tool on our website <http://www2.justice.govt.nz/find-a-legal-aid-lawyer/>

Information about the application process and any grant approved can be found at: [www.justice.govt.nz/apply-for-family-or-civil-legal-aid](http://www.justice.govt.nz/apply-for-family-or-civil-legal-aid)

 To learn how to sign a PDF document, go to: <https://helpx.adobe.com/reader/using/sign-pdfs.html>

**Lawyer's details** To be completed by your lawyer

**25** LA Provider number

**26** Full lawyer name

**27** Name of instructing solicitor (if required)

**Proceedings**

**28** What date were instructions first received?

**29** Have any of the matters subject to the application been disposed of in court, tribunal or any other means? Yes  No

If yes – what was the date of final disposition?

**30** Give reasons for any delay in submitting this application:



## Civil legal aid only

**34** Have there been any negotiation or settlement offers in this matter? Yes  No

If yes – provide details:


**35** Is the applicant concerned in a representative, fiduciary or official capacity only? Yes  No

If yes, is it likely the court would order costs be paid out of the estate or fund? Yes  No

**36** Are there any other people who have an interest in this matter? Yes  No

If yes, would any person beneficially interested suffer hardship? Yes  No

## Cost of work not covered by any fixed fee schedules or proceedings steps

**37** Complete these tables for funding sought that is not covered by fixed fee schedules or proceedings steps. Please state all values exclusive of GST.

Proceedings type (eg summary, judgment, harassment)	Steps/stage	Hours sought	Total (excl GST)

Other (eg interlocutory application)	Steps/stage	Hours sought	Total (excl GST)

Disbursements	Steps/stage	Hours sought	Total (excl GST)
		Total	\$
		Total (GST)	\$
		Grand Total incl GST	\$

## Lawyer's confirmation

### As the lead lawyer completing and signing the application form:

- » I acknowledge and confirm my obligation to take all reasonable steps to protect the interests of the Legal Services Commissioner (the Commissioner) in relation to charges and proceeds of proceedings.

### I also confirm that:

- » I will advise the Commissioner if circumstances arise that would affect the prospects of success of the proceedings,
- » the applicant has been advised about their responsibilities and rights.

### I am aware of my obligations to notify the Commissioner:

- » of any change to the applicant's address, or any increase in their income or assets (where I am aware),
- » that the applicant avoided/is avoiding/is attempting to avoid making payments to the Commissioner from proceeds of proceedings (where I am aware).

### I have advised the applicant:

- » that any arrears from a previous grant of legal aid could mean that this application is refused
- » of the fact that they have waived legal professional privilege for the purpose of an audit or an investigation by the Performance Review Committee or any other investigation of me under the Act and the effects and implications of that waiver
- » that a repayment may be required
- » of interest being added on outstanding debt incurred by the applicant and the debt recovery powers of the Commissioner.
- » if the applicant appeared via audio visual link (AVL) they consent to me signing the form on their behalf.

Signature of lawyer/representative

Date

dd / mm / yyyy

Click: [View](#) → [Fill & Sign](#) → [Place Signature](#)

 To learn how to sign a PDF document, go to: <https://helpx.adobe.com/reader/using/sign-pdfs.html>

## More information

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### You can email the completed form to:

- » [aklfamilylegalaid@justice.govt.nz](mailto:aklfamilylegalaid@justice.govt.nz)
- » [aklcivillegalaid@justice.govt.nz](mailto:aklcivillegalaid@justice.govt.nz)
- » [wgnfamilylegalaid@justice.govt.nz](mailto:wgnfamilylegalaid@justice.govt.nz)
- » [wgncivillegalaid@justice.govt.nz](mailto:wgncivillegalaid@justice.govt.nz)

### Or post it to:

- » Legal Aid Services  
BX10660, Auckland
- » Legal Aid Services  
SX10146, Wellington

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