

Legal aid file No.

Court registered No.

Application for Criminal Legal Aid Court of Appeal or Supreme Court

Personal details of applicant

Please PRINT clearly

List other names you use now or in the past. eg maiden name

1. What title do you wish to be known by?

Mr Mrs Miss Ms Dr

2. What are your first names?

3. What is your surname or family name?

4. Do you use or have you used other names?

No Write other names here

Yes →

5. Are you: Male Female

6. What is your date of birth?

day	month	year	

Addresses

Please include:

- suburb
- town, city
- postcode (if known)

7. Are you being held in custody?

No
 Yes → Write name of place

8. What is your usual home address?

postcode:

9. What is your mailing address? (if different from above)

postcode:

Phone & email

If you do not have a phone, give the number of a friend or relative we can call if we need to contact you

10. What are your contact telephone and email details?

Home phone () Work phone ()

Mobile phone

Other contact phone () Whose phone number is this? (write name)

email address(es)

Ethnic group

Question 11 provides statistics for research and development. You do not have to answer if you do not want to.

11. Which ethnic group do you belong to? Tick one

NZ European or Pakeha Other European NZ Maori Cook Is. Maori
 Samoan Tongan Niuean Chinese
 Indian Other → Please specify: (such as Fijian, Korean)

Children

Also include children not living with you but who you support financially

12. Do you have any financially dependent children?

No

Yes → How many children?

→ How many of these children live with you?

Partner

A partner is:

- a wife or husband
- a civil union partner
- a de facto partner (someone with whom you have a relationship in the nature of marriage)

13. Do you have a partner?

No → Go to Question 19 on next page

Yes → Give details below

14. Name of partner

15. Partner's date of birth

day	month	year							

16. What income did your partner get over the last 12 months? Tick one or more

No income

Benefit income → Please state type of benefit

→ Tick if still getting this payment OR ended month year

<input type="checkbox"/> Wages or salary →	Gross annual income for the last 12 months	Gross annual income for next 12 months (if income likely to change)
	\$ <input type="text"/> (before tax)	\$ <input type="text"/> (before tax)
<input type="checkbox"/> Other income →	\$ <input type="text"/> (before tax)	\$ <input type="text"/> (before tax)

Estimate if accurate information is not available.

Do not include any joint income.

Do not include any joint assets or liabilities in Questions 17 and 18. You will need to show any joint assets or liabilities in your financial details on pages 5 & 6.

17. Does your partner own any assets and/or have any money or investments separate from you?

No Yes → Give details below

Item	Estimated value	Amount owing
	\$ <input type="text"/>	\$ <input type="text"/>
	\$ <input type="text"/>	\$ <input type="text"/>
	\$ <input type="text"/>	\$ <input type="text"/>

18. Does your partner have any other loans or debts separate from you?

No Yes → Give details below

Item	Amount owing
	\$ <input type="text"/>
	\$ <input type="text"/>
	\$ <input type="text"/>

continue on a separate sheet if necessary...

IMPORTANT INFORMATION

The income and assets of your partner (or your parents/guardian, if you are a minor) are treated as your resources in order to determine financial eligibility and repayment of legal aid.

However their resources may not be counted if your partner was charged with the same offence.

Your partner may be required to provide further information and evidence to assess your application.

You may need assistance to complete this section

Legal matters

19. What court are you going to?

- Court of Appeal Supreme Court

20. What are you appealing?

- Conviction Conviction and sentence
 Sentence Pre-trial ruling

Other → Please state

21. What offence(s) have you been convicted of that relate to this appeal application?

22. In which court were you convicted?

- District Court → Court Location (*town, city*)
 High Court →

23. Who was your trial lawyer?

Lawyer's name

Law firm

24. On what date were you sentenced?

day	month	year	

25. What was your sentence?

26. Was anyone else charged with you for these offences?

- No
 Yes → Full name(s)

Lawyer

27. Who do you want as your lawyer for the appeal?

- A lawyer assigned by the Legal Services Agency → Go to Question 29
 The trial lawyer
 Another lawyer of your choice

↓
Your lawyer's name

Law firm

28. Has your lawyer told you that he or she can act for you on this appeal?

- No Yes

Additional information

29. Describe any factors about your appeal that you want the Agency to consider on why aid should be granted

Income source

Income could include:

- Work and Income benefit
- child support
- wages
- rents
- business or trust income

30. Did you get any income in the last 12 months?

Yes → Go to question 31

No → How have you been financially supported over the last 12 months?

In prison

Other Please explain

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Go directly to Question 37

Work and Income

31. In the last 12 months did you get any of the following benefits?

No → Go to Question 33

Yes → Tick one or more below

For how many months
in the last year?

Tick if you are still
getting this payment

	For how many months in the last year?	Tick if you are still getting this payment
<input type="checkbox"/> Unemployment Benefit		<input type="checkbox"/>
<input type="checkbox"/> Domestic Purposes Benefit		<input type="checkbox"/>
<input type="checkbox"/> Sickness Benefit		<input type="checkbox"/>
<input type="checkbox"/> Invalids Benefit		<input type="checkbox"/>
<input type="checkbox"/> New Zealand Superannuation		<input type="checkbox"/>
<input type="checkbox"/> Independent Youth Benefit		<input type="checkbox"/>
<input type="checkbox"/> Widows Benefit		<input type="checkbox"/>
<input type="checkbox"/> War or Veterans Pension		<input type="checkbox"/>

IMPORTANT INFORMATION
‘Extra help’ payments from Work and Income are not counted as income for working out legal aid eligibility. eg:

- Accommodation Supplement
- Emergency Benefit
- Disability Allowance
- Special Benefit
- Child Disability Allowance and other special assistance payments

32. Do you have a current Work and Income client number?

No Yes → Write your number here

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Wages & salary

This includes income from full-time, temporary, casual, seasonal or part-time work over the last year

33. In the last 12 months did you get any wages or salary?

No → Go to Question 34 Yes → Give details below

	Hourly rate before tax	Hours normally worked in a week	or	Gross annual income (before tax and other deductions)	Months worked in the last year	Tick if still employed	or	Employment ended month year
Current main employer (also complete main job details in 33a below) →	\$		or	\$		<input type="checkbox"/>	or	
2	\$		or	\$		<input type="checkbox"/>	or	
3	\$		or	\$		<input type="checkbox"/>	or	
4	\$		or	\$		<input type="checkbox"/>	or	

continue on a separate sheet if necessary . . .

33a. For your current main job, complete details below:

Name of employer

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Employer address

Your work email address

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How often do you get paid? Weekly Fortnightly 4 weekly Calendar monthly

When is your next pay date?


day	month	year	year

You will need to supply proof of income eg payslip

Business & trusts

34. In the last 12 months did you get any income from being:

- Self-employed? No Yes →
 A partner in a business? No Yes →
 A director of a company? No Yes →

 You will need to include a copy of your latest set of annual accounts.

35. Do you get, or are you entitled to, or able to receive any money or benefits from a trust?

- No Yes →

 You will need to complete and attach the Agency 'trust' form (go to www.lsa.govt.nz to download the form or contact the Agency)

Other Income

36. In the last 12 months did you get any other income or one off payments?

- No Yes → Give details below

Family Assistance. If you have received or could receive a lump sum payment instead of instalments, state the amount that relates to the last 12 months.

	Amount of each payment	How often do you get payments? (eg weekly, fortnightly, monthly, yearly)	Is the amount of payment: before tax? after tax?	How many months in the last year did you get this payment?	Tick if you still get this payment
Family Assistance from IRD (see note above)	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Paid parental leave	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Child Support or maintenance	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
ACC weekly compensation	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Student allowance	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Other - please state					
	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>

Change of income

37. Is your income likely to change in the next 12 months?

- No
 Yes →

For example, you will be:
 • retiring from work
 • changing or starting a job

Why would it change?

How much do you think your income will be over the next 12 months?

\$ before tax after tax

Home ownership

38. Do you own, part own or have an interest in a home?

- No Yes → Give details below

Relationship to you
 eg:
 • current partner
 • former partner
 • trust
 • company

Who is named as the legal owner(s)?

Relationship to you
 (if other persons)

Address of home

What is the estimated market value?


\$

What is the amount of any remaining mortgage(s)?

\$

What is your share of ownership in this home? (eg 50%)

%

 You will need to attach a copy of the rates notice

Other property or land

Relationship to you
eg:
• current partner
• former partner
• trust
• company

If you own this property or land with someone else, please show the total property value. Market value is what this property or land could sell for today.

You will need to attach a copy of the rates notice

39. Do you own, part own or have an interest in other property or land?

No Yes → Give details below

Who is named as the legal owner(s)?

Relationship to you
(if other persons)

Address of property or land

What is the estimated market value?

\$

What is the amount of any remaining mortgage(s)?

\$

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

%

Vehicles

Vehicles could include car, truck, motorcycle, boat, caravan, motor home

40. Do you own or part own any vehicles?

No Yes → Give details below

	Make and Model	Year	Registration Number	Market value	Money owing
Main vehicle for personal use				\$	\$
Other vehicle				\$	\$
Other vehicle				\$	\$

Money & investments

DO NOT include equity in a business or trust - we will work out this amount for you based on the set of accounts you give us.

41. Do you have any money or investments?

No Yes → Give details

Current value

Cash, savings, term deposits

\$

Shares, bonds, debentures

\$

Money owed to you

\$

Retirement or superannuation scheme

\$

Other investments (eg artworks, antiques)

\$

Household items

Household and personal possessions could include
• clothing
• furniture
• appliances

42. Do you own any personal and household items which could be sold for more than \$1000?

No Yes → Give details

List items of value

Estimated resale value

	\$
	\$
	\$

Tools of trade

43. Do you own any equipment and tools you use for work?

No Yes → What is the total estimated resale value?

\$

Loans & debts

DO NOT include amounts that you have declared as owing under property and vehicle questions.

44. Do you have any other loans or debts?

No Yes → Give details

Amount currently owing

Bank overdraft and/or personal loan

\$

Credit cards/store cards

\$

Hire purchase

\$

Money owed to government agencies (eg fines, IRD, Work and Income, Student Loan)

\$

Money owed to other people

\$

Other debts (eg medical, school fees, phone, power)

\$

When requested you will need to supply proof of these debts

Other financial information

45. During the last 12 months, have you sold, transferred ownership or given away any money or property worth more than \$3,500?

No Yes → Give details

46. Are there other financial circumstances you want the Agency to consider when we assess your application?

No Yes → Give details

Privacy statement

- The Legal Services Agency (“the Agency”) will collect or disclose personal information about you, to meet its responsibilities under the Legal Services Act 2000, 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.
- Under the Privacy Act 1993 you have the right to request access to all information held about yourself, and to request corrections to that information.
- It is not compulsory to provide the Agency with information, but if you do not provide all the information requested, your application may not be able to be assessed, or may be declined.

I acknowledge that:

- I may be required to provide evidence to support the information I have supplied in this application.
- The Agency will assess my financial means for a repayment and as a result I may be required to repay some or all of my legal aid.
- Any assets and property that I own may be the subject of a charge in favour of the Agency to cover some or all of my required repayment amount.
- I must notify the Agency immediately of any change to my address, or if my income or assets increase while I am an aided person or have a debt to the Agency.
- I understand that I must provide up-to-date information in any enquiry into my financial means while I am an aided person or have a debt to the Agency.
- It is an offence, for which I am liable on summary conviction to a fine, to:
 - fail without reasonable excuse to provide information or documents, or answer questions when I am required to do so under the provisions of the Legal Services Act 2000 or associated regulations
 - knowingly provide false and misleading information or answer any question in a false and misleading way.

I consent to:

- The Agency contacting Work and Income or any other third party to obtain verification of my financial means. That is, I give my permission for:
 - the Agency to verify my benefit income statement with Work and Income, and for Work and Income to provide information about my benefit income to the Agency; and
 - other third parties to provide the information they are asked for to the Agency.
- The Agency contacting me by post, telephone, text messaging, facsimile, email or any other verbal, written or electronic form unless I advise the Agency otherwise.

I confirm that:

- I have no insurance or indemnification available to cover some or all of my legal costs.
- The information I have given in this application is true and not misleading, and is complete to the best of my knowledge.
- I have read and understood the Privacy statement, and my acknowledgment, consent and confirmation statements set out above.

Applicant's signature

Signature of Applicant

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Date

day	month	year	

Has this application been completed by someone else on behalf of the applicant?

No Yes → Name of representative

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Relationship to applicant

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Provider's confirmation

- I acknowledge and confirm my obligation to take all reasonable steps to protect the interests of the Legal Services Agency in relation to charges.

The applicant has been advised about:

- The matters referred to in the applicant's "Acknowledgment, consent and confirmation" section of this application.
- My obligation to notify the Agency of any change to their address, or any increase in their income or assets (disposable capital).
- The fact they are deemed to have waived any legal professional privilege in the above circumstances.
- The potential cost of services for the proceedings for which aid is sought; and
- The condition that a repayment may be required.

Signature

Date

day	month	year	

Checklist

To avoid delay in considering this application, check you have attached the following documents:

- Proof of income (for wages or salary)
- Latest set of annual accounts (if self-employed or have an interest in a business)
- Trust form (if an interest in a trust)
- Copy of rates notice (if own a home or other property)

Forward this application to the Wellington Legal Aid Office

LSA office use only

Lead Provider

Level of experience

- 1 2 3

Assignment Type

- R Pr

Case Category

- 5 6

Approved

Maximum grant

PRA

\$

IR

\$

AP

Lump sum

Security

Name

Signature

Date

day	month	year	

Comments

Refused

Name

Signature

Date

day	month	year	

Reasons & comments

Further information required

Name

Signature

Date

day	month	year	

Comments
