

Application for Write-off/Exemption

Notes

This form is to help you ask for a write-off of legal aid debt, or for an exemption from a charge over property that is part of proceeds of proceedings.

The Agency can write-off some or all of your debt under section 37 of the Legal Services Act 2000. The Agency can also exempt property that is part of proceeds of proceedings from a charge under section 33 of the Act.

Please answer relevant questions to the best of your ability. If you need help to make this application, you can call us on 0800-600-090.

Personal details of aided person

Please PRINT clearly

1. What is your name?

2. What is your legal aid number?

3. What is your home address?

postcode:

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

postcode:

5. What are your contact telephone and email details?

Home phone

Work phone

Mobile phone

email address(es)

Reason for application

6. What do you want the Agency to do? Tick one

- Write-off some of my debt to the Agency → Amount you want written off
- Write-off all of my debt to the Agency
- Write-off interest on the debt
- Write-off fees and charges for registering a security
- Exempt my property from a charge

7. What are your reasons for applying for a write-off or exemption from a charge over property? Tick one or more

- I cannot afford to repay the Agency → Go to "Serious hardship" section on page 3
- There are other reasons → Go to 'Just & Equitable' section on page 2

Wages & salary

You will need to attach proof of income eg payslip

15. Are you currently working?

No → Have not worked in the last year
 Stopped work on: →

month	year

Yes → Name of employer for main job:
 → Employer address:

Give income details here about your main job and any other current employment

Your main employer →
 Write name(s) of other employer(s) here:

Hourly rate before tax	Hours normally worked in a week	or	Gross annual income <small>(before tax and other deductions)</small>
\$ <input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	or	\$ <input style="width: 80%;" type="text"/>
\$ <input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	or	\$ <input style="width: 80%;" type="text"/>
\$ <input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	or	\$ <input style="width: 80%;" type="text"/>

16. Is your partner currently working?

No **Yes** → *Give details*

	Partner's hourly rate before tax	or	Hours normally worked in a week	or	Partner's gross annual income <small>(before tax and other deductions)</small>
Main employer	\$ <input style="width: 80%;" type="text"/>	or	<input style="width: 80%;" type="text"/>	or	\$ <input style="width: 80%;" type="text"/>
Other- 1	\$ <input style="width: 80%;" type="text"/>	or	<input style="width: 80%;" type="text"/>	or	\$ <input style="width: 80%;" type="text"/>
Other- 2	\$ <input style="width: 80%;" type="text"/>	or	<input style="width: 80%;" type="text"/>	or	\$ <input style="width: 80%;" type="text"/>

Business & trusts

17. Do you or your partner get any income from being self-employed, a partner in a business or a director in a company?

No **Yes** → _____

18. Are you or your partner entitled to, or able to receive any money or benefits from a trust?

No **Yes** → _____

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

Other income

19. Do you or your partner get any other income?

No **Yes** → *Give details*

	Yearly income <small>(before tax and other deductions)</small>	
	You	Your partner
Family Assistance from IRD	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Child Support or maintenance	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
ACC weekly compensation	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Student allowance	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Insurance or super scheme payment	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Rental income from other property	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Income from 3 or more boarders	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Interest and Dividends	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Value of goods/services received regularly instead of income. <i>eg free accommodation</i>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Other - please state _____	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Total other income	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>

20. Did you or your partner get any one-off income payments in the last year?

No **Yes** → *Give details below*

Income from:	Amount of payment	Date of payment				
	\$ <input style="width: 80%;" type="text"/>	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; text-align: center;">month</td><td style="width: 20px; text-align: center;">year</td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>	month	year		
month	year					
	\$ <input style="width: 80%;" type="text"/>	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; text-align: center;">month</td><td style="width: 20px; text-align: center;">year</td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>	month	year		
month	year					

For example: a bonus, redundancy or termination payment

Assets & liabilities section

- Do not include any business or trust assets and liabilities in this section. We will work out amounts for you based on the set of accounts you give us.
- Estimates are required if accurate information is not available.

Property ownership

21. Do you or your partner own any property or land?

No Yes →

Total market value of property
\$

Total of any remaining mortgage(s)
\$

Vehicles

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

22. Do you or your partner own any vehicles?

No Yes →

Total market value of vehicle(s)
\$

Total of any money owing on vehicle(s)
\$

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

23. Do you or your partner have any money or investments?

No Yes → Give details

	Current value
Cash, savings, term deposits	\$ <input type="text"/>
Shares, bonds, debentures	\$ <input type="text"/>
Money owed to you	\$ <input type="text"/>
Retirement or superannuation scheme	\$ <input type="text"/>
Other investments (eg artworks, antiques)	\$ <input type="text"/>
Total	\$ <input type="text"/>

Loans & debts

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

24. Do you or your partner have any other loans or debts?

No Yes → Give details

	Amount currently owing
Bank overdraft and/or personal loan	\$ <input type="text"/>
Credit cards/store cards	\$ <input type="text"/>
Hire purchase	\$ <input type="text"/>
Money owed to government agencies (eg fines, IRD, Work and Income, Student Loan)	\$ <input type="text"/>
Money owed to other people	\$ <input type="text"/>
Other debts (eg medical, school fees, phone, power)	\$ <input type="text"/>
Total	\$ <input type="text"/>

Other financial information

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

No Yes → Give details

Household expenses

- Do not include any business or rental property expenses in this section.
- Estimates are required if accurate information is not available.
- We will assess your ability to meet your living expenses against normal community standards.

26. What are the weekly expenses for you, your partner and dependants?

	Weekly expenses
Rent or board	\$
Mortgage payments	\$
Rates	\$
House maintenance	\$
House and/or contents insurance	\$
Power/gas	\$
Food and groceries	\$
Telephone (including mobile)	\$
Pay TV and/or internet	\$
Rental of household items (eg fridge, washing machine)	\$
Transport (eg bus, train, taxi fares and petrol)	\$
Vehicle costs (maintenance, registration and insurance)	\$
Clothing and footwear	\$
Childcare and school expenses (eg fees, books, activities)	\$
Child support and maintenance payments	\$
Access to children (eg travel & accommodation)	\$
Donations (eg church, charity)	\$
Animal expenses (eg food, vet, registration)	\$
Recreation (eg sport, hobbies, entertainment)	\$
Medical (not claimed on insurance eg doctor, dentist, optician)	\$
Other insurance (eg medical, life)	\$
Superannuation contributions	\$

Other loan & debt payments:

Weekly expenses

Personal loan payments	\$
Credit card and/or store card payments	\$
Payments to government agencies (eg Court fines, Work and Income, IRD, student loan)	\$

Other expenses *Please state:*

Weekly expenses

	\$
	\$
	\$

Total weekly expenses

\$

Acknowledgment, consent and confirmation

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.
- 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.
- I must notify the Agency immediately of any change to my address, or if my income or assets (disposable capital) 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 I 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
 - intentionally avoid payment of the Agency’s interest in any proceeds of proceedings.

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 providing my representative with a copy of the outcome of this application.

I confirm that:

- The information I have given in this form 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.

Signature

Signature of aided person

Date

day	month	year

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

No

Yes → Name of representative (and organisation)

Day time phone number

email address

Postal address

postcode:

Submitting your application

To avoid delays in considering this application, check you have:

- Answered questions to the best of your ability
- Signed and dated this form
- Attached proof of income (for wages or salary)
- Attached a copy of latest set of annual accounts (if you or your partner are self-employed, and/or have an interest in a business or trust)

The Agency will contact you or your representative, if you are required to supply further evidence to support your financial statement or special circumstances.

Keep a copy of your completed application for your own records and mail the original to:

**Debt Management Group
Legal Services Agency
PO Box 25324
WELLINGTON 6146**

