

### 05/15 form **18**

Client or Legal aid number

# **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 Legal Services Commissioner can write-off some or all of your debt under section 43 of the Legal Services Act 2011. The Legal Services Commissioner can also exempt property that is part of proceeds of proceedings from a charge under section 37 of the Act.
- Please answer relevant questions as best as you can.
- If you need help, you can call Legal Aid Debt on 0800 600 090.

,		
Personal details of applicant	1.	What is your full name?
Please PRINT clearly	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?
If you do not have a phone, give		Home phone Work phone
the number of a friend we can call if we need to contact you		
		Mobile phone
		Other contact phone Whose phone number is this? (write name)
		Email address(es)
Reason for application	6.	Please choose one of the following options:
		Write-off some my legal aid debt → Amount you want written off \$
		Write-off all of my legal aid debt
		Write-off interest on my legal aid 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 my legal aid debt ——— Go to "Serious hardship" section on page 3
		There are other reasons ———————————————————————————————————

#### **Just and Equitable**

- Complete this section if you are applying on grounds other than serious financial difficulties.
- Give us your reasons (as set out below) or any other reason you want us to consider.
- Answer questions as best as you can. Use estimates if accurate information is not available.

If you do not know the answer to a question, you may leave it blank

I would be left with a small amount of the value of proceeds awarded to me  What was the value of proceeds awarded to you?  What value did you expect to get after you met your legal costs?  Give further details below  The cost of my case was greater than it should have been because of the behaviour of the other party  How much greater were the costs?  Did you seek costs from the other party?  No  Yes How much was awarded to you?  Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below  Further information to support your application
What value did you expect to get after you met your legal costs?  Give further details below  The cost of my case was greater than it should have been because of the behaviour of the other party  How much greater were the costs?  Did you seek costs from the other party?  No  Yes — How much was awarded to you?  Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below
Give further details below  The cost of my case was greater than it should have been because of the behaviour of the other party  How much greater were the costs?  Did you seek costs from the other party?  No  Yes How much was awarded to you?  Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below  Other reasons  Give details below
The cost of my case was greater than it should have been because of the behaviour of the other party  How much greater were the costs?  Did you seek costs from the other party?  No  Yes — How much was awarded to you?  Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below
party  How much greater were the costs?  Did you seek costs from the other party?  No  Yes — How much was awarded to you?  Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below
How much greater were the costs?  Did you seek costs from the other party?  No  Yes — How much was awarded to you?  Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below
Did you seek costs from the other party?  No  Yes — How much was awarded to you?  Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below
No Yes — How much was awarded to you? \$ Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below
Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below
Give details below of the actions of the other party that increased the cost  I consider the nature of the case put me under extreme strain  Give details below  Other reasons  Give details below
Cive details below  Other reasons  → Give details below
Other reasons Give details below
Give details below
Further information to support your application
continue on page 8 if necessary
Are you also applying because you cannot afford to repay what you owe?
Yes → Go to 'Serious Hardship' section on page 3

Serious Hardship	
■ If you live with a partner, you w	applying for a write-off because of serious financial difficulties. ill need to provide information about their financial position. our partner will need to supply proof of income, household expenses, assets and liabilities. te information is not available.
Reasons	9. Please choose one of the following options:
Fick one or more options and give a brief explanation in question 9a serious illness or injury is one that is likely to continue for a period of its months or more, and impacts on your ability or work or undertake normal daily activities	I will not be able to meet basic living expenses  I will not be able to meet the cost of medical treatment for the illness or injury suffered by me or a dependant  I (or a dependant) have a serious illness or injury  9a. Briefly explain your situation and why repaying what you owe will cause you serious financial difficulty
	continue on page 8 if necessary
Partners & Children	10. Do you have any financially dependent children?
Also include children not living with you but who you support inancially. A partner is: a a wife or husband a a civil union partner you have a relationship in the nature of marriage)	No Yes → How many?
Change in financial means	12. Have you provided a statement of your financial position to Legal Aid in the last six months?  No → Complete questions 13 to 25  Yes → Has your income and/or asset position changed since then?  No → Go to question 25  Yes → Complete questions 13 to 25
Work and Income	13. In the last 12 months did you get paid any of the following benefits?
IMPORTANT INFORMATION	No $\longrightarrow$ Go to question 15  Yes $\longrightarrow$ Tick one or more below
'Extra help' payments from Work and Income are not counted as income for working out legal aid eligibility, eg:  • Accommodation Supplement  • Emergency Benefit	For how many months in the last year? It is if you are still getting this payment wonth year  Jobseeker Support  → Please tick if one of the following applies to you  Sole parent  Single, 18-19, at home
<ul><li>Disability Allowance</li><li>Special Benefit</li></ul>	Single, and received the Domestic Purposes Benefit woman alone or Widows Benefit woman alone, before 15 July 2013
Child Disability Allowance	Sole Parent Support
and other special assistance payments	Supported Living Payment  Please tick if sole parent

Youth Payment

Young Parent Payment

NZ Superannuation
Veterans Pension

the Family Tax Credit threshold

Please tick if 16-17, supported by parents earning less than

You will need to attach proof of

your benefit, eg statement from WINZ

	14. <b>D</b> o	o you have a c	urrent Work	and In	come client num	ber?					_
		No	Yes	Write	your number he	re					
Wages & salary	15. <b>in</b> 1	the last 12 mo	nths did you	ı get ar	ny wages or salar	y?					_
		No → Go	to Question	16	Yes <del>→</del> Giv	ve details	below				
This includes income from full-time, casual, seasonal or part-time work over the last year	temporary,	Hourly rate before tax	Hours normally worked in a week	OR	Gross annual income (before tax and othe deductions)		Months worked in the last year	Tick if still employed	OR	Employmen	
Current mai		\$		or	\$				or	month	year
(also complete main job details in	15a below)	\$		or	\$				or		
		\$			\$						
3				or					or		
		-	_	comple	ete details below	:					
You will need to attach proof of income eg pay slip		ne of employe									
oj income eg pay sup	Em	ployer address									
	16 <b>in</b> 1	the last 12 mo	nths did you	ır nartı	ner get any wage	s or salar	-v?				
	10	$No \rightarrow Go$	•		Yes → Give						
				1,	Gross annual income		Months	Tick if			
Name of employer(s)	'	Hourly rate before tax	Hours normally worked in a week	OR	(before tax and othe deductions)	r	worked in the last year	still employed	OR	Employmen month	
1		\$		or	\$				or		700.
2		\$		or	\$				or		
3		\$		or	\$				or		
			II.		l						
Business & trusts			onths did yo	u or yo	our partner get a	-	e from beir	ıg:			
		employed			No Yes			l need to in			our
		rtner or direct		-	No Yes	to receiv					.7
		No No			to complete and attach		•	•			
Other income	19. lr	n the last 12 m	onths did yo	ou get a	any income or on	e off pay	ments?				
WORKING FAMILIES TAX CREDIT If you have received or could receive a sum payment instead of instalments, s amount that relates to the last 12 mon	tate the	No Amount o	f each	How payr	etails below often do you get nents? ( weekly, fortnightly)	Is the before tax?	payment: after tax?	Months rec payment ir last yea	n the	Tick if yo get th payme	nis
Working for Families Tax Credit	see note above	\$									
Child Support or maintenance		\$				<b>✓</b>					
Paid parental leave		\$									
ACC weekly compensation		\$									
Student allowance		\$									
Redundancy or termination payment		\$									
Insurance or super scheme payment		\$									
Rental income from other prope	rty	\$									
Income from 3 or more boarders	S	\$									
Interest and Dividends		\$									
Value of goods/services received regincome. eg free accommodation	gularly instead of	f \$									
<u> </u>		1 4									

	_			
Assets	v.	112	nı	LITIO
HOOFIG	CX	LIA	UII	шч

Property owners	ship 20.	Do you or your part	ner own, part o	wn or have an interest i	n any property o	r land?
		No Yes —	<ul><li>Give details b</li></ul>	elow		
If you own this home w	with someone else, please	What is the e	stimated marke	et value?	\$	
• •	y value. Market value is	What is the a	mount of any r	emaining mortgage(s)?	\$	
what this home could s	sell for today.					
		What is your	share of owner	ship in this home? (eg 50	%)	%
Vehicles	21.	Do you or your part	ner own or par	t own any vehicles?		
'ehicles could include ca oat, caravan, motor ho	•	No Y	es <del>→</del> Give o	letails below		
Main vahiala far	Make a	and Model	Year	Registration Number	Market value	Money owing
Main vehicle for personal use					\$	\$
Other vehicle					\$	\$
Other vehicle					\$	\$
O NOT include equity in ill work out this amouret of accounts you give		Cash, savings, term Shares, bonds, debe		ecuis below		Current value \$
		Money owed to you				\$
Retirement or superannuation scheme (please do not enter your KiwiSaver information			viSaver information)	\$		
		Other investments (				\$
Loans & de	ebts 23.	Do you or your part	ner owe any m es → Give d	•		Amount currently owing
DO NOT include amou		Bank overdraft and	or personal loa	n		\$
you have declared as under property and ve	_	Credit cards/store of	cards			\$
questions.		Hire purchase				\$
M/h	· 11 · · · · · · · · · ·	Money owed to gov	vernment agend	ies (eg fines, IRD, Work and Inco	ome, Student Ioan)	\$
When requested you will need to supply proof of these debts		Money owed to oth	\$			
,,		Other debts (eg med	dical, school fees,	phone, power)		\$
Other final		any money or prop			ransferred owne	ership or given awa

■ 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

- 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.

#### 25. 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 below:	Weekly expenses
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total weekly expenses	\$

#### Privacy statement

Lacknowledge that

- The Legal Services Commissioner ("the Commissioner") will collect or disclose personal information about you to meet its responsibilities under the Legal Services Act 2011, 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 have access to all information held about yourself, and to request correction of that information.
- It is not compulsory for you to provide the Commissioner 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 may be required to provide evidence to support the information I have supplied in this application.
- The Commissioner 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.
- Interest will be charged on all my legal aid debt still outstanding 6 months after my debt is determined.
- If I fail to meet my repayment obligations the Commissioner may:
  - □ send my debt to a third party debt collection agency
  - use a deduction notice to require automatic deductions from my benefit, employment income or bank account.
- Any assets and property that I own may be the subject of a charge in favour of the Commissioner to cover some or all of my required repayment amount. This includes any interest charged on my debt
- Any assets and property including money or property that I receive or retain as a result of the
  proceedings are the subject of a charge in favour of the Commissioner to cover all or some of my
  legal aid.
- I must notify the Commissioner immediately of any change to my address, or if my income or assets (disposable capital) increase while I am receiving legal aid or have a debt to the Commissioner.
- I understand that I must provide up-to-date information in any enquiry into my financial means while I am receiving legal aid or have a debt to the Commissioner.
- It is an offence, for which I am liable on police prosecution conviction to a fine, to:
  - fail without reasonable excuse to furnish information, or answer questions, or produce any document or thing, when I am required to do so under the provisions of the Legal Services Act 2011 or associated regulations
  - knowingly provide false and misleading information, or answer any question in a false and misleading way and
  - □ Intentionally avoid payment to the Commissioner of any proceeds from proceedings.
- The Commissioner contacting Work and Income or any other third party to obtain verification of my financial means, bank account, employer or address or phone number. That is, I give my permission for:
  - the Commissioner to verify my benefit income statement with Work and Income, and for
     Work and Income to provide information about my benefit income to the Commissioner and
  - other third parties (including my employer, bank or other income source) to provide the information they are asked for to the Commissioner.
- The Commissioner contacting me by post, telephone, text message, facsimile, email or any other verbal, written or electronic form unless I advise the Commissioner otherwise.
- My lawyer providing any file, record, document or statement, or giving any information for the purposes of an audit or an investigation by the performance review committee or any other investigation of my lawyer under the Legal Services Act 2011, and I waive legal professional privilege for this purpose.
- 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 this application is completed to the best of my knowledge.
- I have read and understood the Privacy statement, and my acknowledgement, consent and confirmation statements set out above.

Appl			

Signature (or	type your name)	Date
No	lication been completed by someone else on behalf of the ap  Yes  Name of person	plicant?
<ul><li>For example:</li><li>parent</li><li>guardian</li><li>trustee</li></ul>	Relationship to applicant	

Answered all relevant to provide the form Completed income and means assessment sections (if applying under "Serious hardship") Attached relevant supporting information e.g. proof of income/debts, judgment, letter from provider of an interest in a business or transporting information and/or your partner are self employed, or have an interest in a business or transport and interest in a business or transport and interest in a trust)  Trust form (if you and/or your partner have an interest in a trust)  Trust form (if you and/or your partner have an interest in a trust)  Bebt Management Group Legal Aid DX \$11285  WELLINGTON  Due can use this space for any additional information you want Legal Aid to consider.	Checklist	To avoid delays in considering this application, check you have:
Completed income and means assessment sections (if applying under "Serious hardship")  Attached relevant supporting information e.g. proof of income/debts, judgment, letter from provider of the latest set of annual accounts (if you and/or your partner are self employed, or have an interest in a business or trust)  Trust form (if you and/or your partner have an interest in a trust)  regal Aid will contact you or your representative, if you are required to supply further evidence to support your financial statement or pecial circumstances. Keep a copy of your completed application for your own records and mail the original to:  Debt Management Group  Legal Aid  DX SX11295  WELLINGTON		Answered all relevant questions as best as you can
Attached relevant supporting information e.g. proof of income/debts, judgment, letter from provider of Latest set of annual accounts (if you and/or your partner are self employed, or have an interest in a business or trust)  Trust form (if you and/or your partner have an interest in a trust)  regal Aid will contact you or your representative, if you are required to supply further evidence to support your financial statement or provider in the provider of the		Signed and dated this form
Latest set of annual accounts (if you and/or your partner are self employed, or have an interest in a business or trust)  Trust form (if you and/or your partner have an interest in a trust)  gal Aid will contact you or your representative, if you are required to supply further evidence to support your financial statement or secial circumstances. Keep a copy of your completed application for your own records and mail the original to:  Debt Management Group Legal Aid DX SX11295 WELLINGTON		Completed income and means assessment sections (if applying under "Serious hardship")
an interest in a business or trust)  Trust form (if you and/or your partner have an interest in a trust)  regal Aid will contact you or your representative, if you are required to supply further evidence to support your financial statement or pecial circumstances. Keep a copy of your completed application for your own records and mail the original to:  Debt Management Group  Legal Aid  DX SX11295  WELLINGTON		Attached relevant supporting information e.g. proof of income/debts, judgment, letter from provider et
egal Aid will contact you or your representative, if you are required to supply further evidence to support your financial statement or pecial circumstances. Keep a copy of your completed application for your own records and mail the original to:  Debt Management Group Legal Aid DX SX11295 WELLINGTON		
Debt Management Group  Legal Aid  DX SX11295  WELLINGTON		Trust form (if you and/or your partner have an interest in a trust)
au can use this space for any additional information you want Legal Aid to consider.	pecial circumstances. Keep a c  Debt Management Group  Legal Aid  DX SX11295	opy of your completed application for your own records and mail the original to:
	ou can use this space for any a	additional information you want Legal Aid to consider.