

# 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

Please PRINT clearly

1. **What is your full 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

Other contact phone

Whose phone number is this? (write name)

Email address(es)

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

## 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 → Go to "Just & Equitable" section on page 2

## 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

### 8. Which of these apply? *Tick one or more*

**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

*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
- No → Go directly to 'Acknowledgements' section on page 7

## Serious Hardship

- Complete this section if you are applying for a write-off because of serious financial difficulties.
- If you live with a partner, you will need to provide information about their financial position.
- When requested, you and/or your partner will need to supply proof of income, household expenses, assets and liabilities.
- Estimates are required if accurate information is not available.

### Reasons

Tick 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 six months or more, and impacts on your ability or work or undertake normal daily activities

9. Please choose one of the following options:

- 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

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

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)

10. Do you have any financially dependent children?

- No  Yes → How many?  → How many live with you?

11. Do you have a partner?

- No  Yes → Name of partner
- Partner's date of birth

### 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

#### 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

**You will need to attach proof of your benefit, eg statement from WINZ**

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

- No → Go to question 15
- Yes → Tick one or more below
- |  | For how many months in the last year? | Tick if you are still getting this payment | Benefit stopped month year |
|--|---------------------------------------|--|----------------------------|
| <input type="checkbox"/> Jobseeker Support<br>↳ Please tick if one of the following applies to you   | <input type="text"/>                  | <input type="checkbox"/>                   | <input type="text"/>       |
| <input type="checkbox"/> Sole parent   |                                       |  |                            |
| <input type="checkbox"/> Single, 18-19, at home  |                                       |  |                            |
| <input type="checkbox"/> Single, and received the Domestic Purposes Benefit woman alone or Widows Benefit woman alone, before 15 July 2013 |                                       |  |                            |
| <input type="checkbox"/> Sole Parent Support   | <input type="text"/>                  | <input type="checkbox"/>                   | <input type="text"/>       |
| <input type="checkbox"/> Supported Living Payment  | <input type="text"/>                  | <input type="checkbox"/>                   | <input type="text"/>       |
| ↳ <input type="checkbox"/> Please tick if sole parent  |                                       |  |                            |
| <input type="checkbox"/> Youth Payment   | <input type="text"/>                  | <input type="checkbox"/>                   | <input type="text"/>       |
| <input type="checkbox"/> Young Parent Payment  | <input type="text"/>                  | <input type="checkbox"/>                   | <input type="text"/>       |
| ↳ <input type="checkbox"/> Please tick if 16-17, supported by parents earning less than the Family Tax Credit threshold                    |                                       |  |                            |
| <input type="checkbox"/> NZ Superannuation   | <input type="text"/>                  | <input type="checkbox"/>                   | <input type="text"/>       |
| <input type="checkbox"/> Veterans Pension  | <input type="text"/>                  | <input type="checkbox"/>                   | <input type="text"/>       |

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

No  Yes → Write your number here

**Wages & salary**

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

No → Go to Question 16  Yes → Give details below

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

Current main employer (also complete main job details in 15a 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
	\$		or	\$		<input type="checkbox"/>	or	
2	\$		or	\$		<input type="checkbox"/>	or	
3	\$		or	\$		<input type="checkbox"/>	or	

15a. For your current main job, complete details below:

**You will need to attach proof of income eg pay slip**

Name of employer   
 Employer address

16. In the last 12 months did your partner get any wages or salary?

No → Go to Question 17  Yes → Give details below

Name of employer(s)	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
1	\$		or	\$		<input type="checkbox"/>	or	
2	\$		or	\$		<input type="checkbox"/>	or	
3	\$		or	\$		<input type="checkbox"/>	or	

**Business & trusts**

17. In the last 12 months did you or your partner get any income from being:

Self-employed  No  Yes →  
 A partner or director of a business  No  Yes →

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

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

No  Yes → you will need to complete and attach the Trust Form, contact Legal Aid or download from [www.justice.govt.nz](http://www.justice.govt.nz)

**Other income**

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

No  Yes → Give details below

	Amount of each payment	How often do you get payments? ( weekly, fortnightly)	Is the payment: before tax? after tax?	Months received payment in the last year	Tick if you still get this payment
Working for Families Tax Credit <small>see note above</small>	\$		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Child Support or maintenance	\$		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Paid parental leave	\$		<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"/>
Redundancy or termination payment	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Insurance or super scheme payment	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Rental income from other property	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Income from 3 or more boarders	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Interest and Dividends	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
Value of goods/services received regularly instead of income. eg free accommodation	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>
	\$		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>

## Assets & Liabilities

- 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

20. Do you or your partner own, part own or have an interest in any property or land?

No  Yes → Give details below

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

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%)  %

### Vehicles

21. Do you or your partner own or part own any vehicles?

No  Yes → Give details below

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

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

### Money & investments

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

No  Yes → Give details below

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.

	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 (please do not enter your KiwiSaver information)	\$ <input type="text"/>
Other investments (eg artworks, antiques)	\$ <input type="text"/>

### Loans & debts

23. Do you or your partner owe any money?

No  Yes → Give details below

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

When requested you will need to supply proof of these debts

	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"/>

### Other financial information

24. 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 below



Privacy statement

- 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 2020 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 acknowledge that:

- 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.

I consent to:

- 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 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 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.

Applicant’s signature

Signature (or type your name) Date

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

No  Yes

*For example:*

- parent
- guardian
- trustee

Name of person

Relationship to applicant

