

APPROVAL OF CRIMINAL LEGAL AID

A) General

1. Name of Applicant _____
2. ICOS Reference Number _____ Court List No. _____

B) Means Test

<u>Person on Benefit</u>	<u>Person NOT on Benefit</u>
Has entitlement to welfare benefits been confirmed by SSA? Yes <input type="checkbox"/> No <input type="checkbox"/>	Has documentary evidence of capital and/or means been supplied? Yes <input type="checkbox"/> No <input type="checkbox"/>

C) Merits Test

Is it in the interests of justice that the applicant should receive full criminal legal aid? Yes <input type="checkbox"/> No <input type="checkbox"/>
The interests of justice criteria were set out by the Widgery Committee as:- <ul style="list-style-type: none">- that the charge is a grave one in the sense that the accused is in real jeopardy of losing his/her liberty or livelihood or suffering serious damage to his/her reputation;- that the charge raises a substantial question of law;- that the accused is unable to follow the proceedings and state his own case because of his inadequate knowledge of English, mental illness or other mental or physical disability;- that the nature of the defence involves the tracing and interviewing of witnesses or expert cross-examination of a witness for the prosecution; or- that legal representation is desirable in the interest of someone other than the accused, as for example, in the case of sexual offences against young children when it is undesirable that the accused should cross-examine the witness in person.

D) Decision

Granted _____ Refused _____ Reserved _____
Signed _____ (Judge) Date _____

Granted after reservation _____
Signed _____ (Judge) Date _____

CRIMINAL LEGAL AID

Statement of Means Form

Form 1

Solicitor's Details

Statement of Means of an applicant under Part III
of the Legal Aid, Advice and Assistance (Northern
Ireland) Order 1981

- (i) If you wish to obtain legal aid in a criminal case you must first complete this form which will be used to determine whether you are entitled to legal aid.
- (ii) **WARNING** – If, in completing this statement, you knowingly make any false statement or false representation, you will be liable to prosecution and if found guilty could be liable to a fine or imprisonment for up to three months or both.
- (iii) Any change of financial circumstances must be notified to the court immediately.
- (iv) Please use **BLOCK** letters in black ink when completing this form.

A – Personal Details

(Please complete questions 1-6 unless you are filling in this form on behalf of a dependant who is not yet 17 years of age in which case you must complete questions 1-5 and 7)

1 **Surname** Mr Mrs Miss Ms

2 **Forename(s)**

3 **Date of Birth**

4 **Permanent address**

5 **If staying at temporary accommodation then state this address**

6 **Marital status** (tick one box only)

Single Single and living together Widowed
 Married Married but separated Divorced
 Other

7 **Relationship to the person under 17 years** (eg father)

B – Case Details

8 **Describe briefly what you are charged with doing** (eg “stealing £50 from an employer”, “kicking a door causing £50 damage”)

C – Financial Details - Benefits

(This section to be completed only by those applicants currently in receipt of benefits or parents/guardians in the case of those applicants under 17 years of age who are in receipt of benefits)

9 **I am in receipt of:**
(please tick box)

<input type="checkbox"/>	Income Support
<input type="checkbox"/>	Income-based Jobseeker's Allowance
<input type="checkbox"/>	Family Credit
<input type="checkbox"/>	Disability Working Allowance

If you are not receiving any of the above you **MUST** specify below those benefits you are receiving.

10 **I have been in receipt of benefit for more than two weeks**

Yes No

11 **National Insurance Number of person receiving benefit**

12 **Address of the Social Security Office dealing with the benefit**

If you do not produce documentary evidence that you are receiving benefit, the court may make its own enquiries or it may not grant Criminal Legal Aid. If you cannot provide evidence you should detail your reasons below. If you are unable to produce this evidence then you must complete those sections marked with an asterisk (*) in question 16.

D – Financial Details

(This section should only be completed by those who are **not** in receipt of benefit)

13 **I am:**

(please tick box)

Employed full-time

Employed part-time

Self-employed

14 **Occupation**

15 **Employer's name and address**

16 **Income**

(please complete the relevant sections)

Full-time work

Enter gross earnings per week (before tax and insurance), including overtime, commission or bonuses. You should attach documentary evidence of the pay you have received. A monthly or weekly wage slip would be the best evidence.

£

Self-employed

If you are self-employed then show your gross earnings and attach the most recent accounts showing gross income.

£

Part-time work

Enter gross earnings per week (before tax and insurance), from any part-time job not included above and attach documentary evidence.

£

Money from property*

Enter weekly amounts (before any deductions) of money from sub-letting a house or rooms and attach documentary evidence.

£

Any other income*

Please give details and weekly amounts and attach documentary evidence.

£

£

£

£

Important: If the information you have given above is going to change soon, please give details of the change in Section F of this Form.

E – Property and Savings

(This section should only be completed by those who are not in receipt of benefit)

(please give details of all your property and savings)

Note: In the questions that follow the value of the equity means the sum which you would receive from the sale of the property after paying the mortgage or other loan on it.

Property

17 Do you own the house or property which you treat as your main dwelling?

Yes No

If so, please provide the following information:

- (i) What is your main dwelling worth now, that is, what is its market value? £
- (ii) What is the mortgage on your main dwelling? £
- (iii) What is the value of the equity in your main dwelling? £
- (iv) Are you the sole owner? Yes No

18 Do you own a house or property other than the house or property which you treat as your main dwelling?

Yes, sole owner Yes, joint owner No

If so, please provide the following information:

- (i) What is the dwelling worth now, that is, what is its market value? £
- (ii) What is the mortgage on the dwelling? £
- (iii) What is the value of the equity in the dwelling? £

Savings

19 Please give details of where your savings are, and the amounts. Type £
Include money in any bank, building society, National Savings Certificates, cash, stocks and shares or any other investments. You should attach documentary evidence.

20 Please give details of any articles of value that you own with their approximate value. You may be asked to produce valuation certificates.

Allowances and Deductions

21 Enter Tax and National Insurance Contributions deducted from your earnings per week.

Tax £ NI £

22 Enter the number of dependants who are living with you. If you are claiming legal aid for a child or young person, please include that child or young person.

Dependants are the people you look after financially.

Spouse/Partner/Civil Partner Children 18 and over Children under 18

Other (please say who)

23 **If you pay maintenance to any dependant who does NOT live with you, please give details of the amounts you pay.**

Name(s) of dependant(s)	Your relationship to the dependant(s)	Age(s) of dependant(s)	Amount per week
<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>

You should attach copies of agreements or court orders.

24 **Give the amounts of rates which you pay.**

- (a) Amount of rates £ per week
(please complete only one box) £ per month
 £ per year

You should attach evidence of this (eg the demand from the Rates Agency)

- (b) Do you receive a rebate on your rates? Yes No
- If yes, then how much? £ per week
(please complete only one box) £ per month
 £ per year

25 **Give the following details of your housing expenses.**

If you own more than one house only give details for the house in which you live. If you are paying the expenses of a dependant who is not living with you, enter the details in the spaces on the right. You should attach copies of rent books, evidence of mortgage instalments and any other changes.

	You		Dependant(s)
Rent	<input type="text"/> £	Rent	<input type="text"/> £
Mortgage Payment	<input type="text"/> £	Mortgage Payment	<input type="text"/> £
Ground Rent	<input type="text"/> £	Ground Rent	<input type="text"/> £
Board and Lodging	<input type="text"/> £	Board and Lodging	<input type="text"/> £
Bed and Breakfast	<input type="text"/> £	Bed and Breakfast	<input type="text"/> £

26 **How much does it cost you each week to travel to and from work?**

£

27 **Give details of other expenses which you think the court should know about.**

F – Further Information

- 28 **Have you directly or indirectly transferred any resources to another person since you became aware that these proceedings would be brought?** If so, please give details.
- 29 **Are the resources of another person available to you eg is another person providing you with free accommodation or paying your bills?** If so, please give details.
- 30 **Please give any other financial information that you think that the court should have when deciding upon your application for legal aid.** You should also include any future changes in circumstances that might alter your position.
- 31 **If you have not attached documentary evidence of all income/benefits that you receive and each allowance you have claimed, you must explain why you cannot do so.**

Declaration

I am aware that if I have knowingly made a statement which is false, or knowingly withheld information in this application, then I may be prosecuted which could lead to conviction, the penalty of which could be a fine, imprisonment for up to three months or both under Article 32(1) of the Legal Aid, Advice and Assistance (Northern Ireland) Order 1981.

I declare that to the best of my knowledge and belief that the information provided in this application is an accurate and complete statement of income, savings and capital and, where appropriate, that of my dependants.

I hereby give my consent to the court taking steps as it may consider necessary to verify the accuracy of information contained within this application.

Signed _____ Date _____

After your application has been considered by the court you may be asked to clarify some information, provide further information or proof in support of this application.

If your financial position changes in any way after you have submitted this application, you must inform the court.