All applications for funding under the Civil Litigation Assistance Scheme must be submitted to:

Administrator
Civil Litigation Assistance Scheme
Legal Aid WA
GPO BOX L916
PERTH WA 6000

Fax: 08 9325 5430

No applications can be accepted direct from the public. An application for funding can only be accepted from a private legal practitioner who is acting for that applicant. If the legal practitioner is not on Legal Aid’s Panel of Practitioners please attach a completed form to the application.

In relation to supporting information do not send original documents. No responsibility is accepted by Legal Aid WA for documents sent to it.

The scheme does not assist with criminal or family law matters. For further information on the type of cases that may be funded and the Conditions of Assistance please go to Legal Aid’s website www.legalaid.wa.gov.au
YOUR APPLICATION FOR LEGAL REPRESENTATION

Completing your application form
Fill in the form, answering all questions truthfully. Your lawyer must tell us everything you know about your case in order for us to decide if we can assist you. It is an offence to make a false or misleading statement or not tell us something you know. All applications for funding under the Civil Litigation Assistance Scheme must be submitted through a lawyer – applications from the public direct cannot be considered.

Payment by you
Funding under the Civil Litigation Assistance Scheme is governed by the CLAS Conditions of Assistance (CLAS Conditions). Your lawyer must provide a copy of the CLAS Conditions to you when you sign your application for funding.

Details of what payments you will be required to make are set out in the CLAS Conditions. In summary, if you are granted assistance under the Civil Litigation Assistance Scheme and your claim succeeds, you will:

- pay the Conditional Fee as set out in the CLAS Conditions; and
- pay the whole of the recovered costs, which are your solicitor’s costs and disbursements paid under the Civil Litigation Assistance Scheme.

If you are unsuccessful AND you were funded to trial, you will not be required to make any payment to the Civil Litigation Assistance Scheme.

However you may have to pay the other party’s costs in full, i.e. the amount of any Costs Order made against you.

Money received on your behalf
By signing this application for funding, you agree that your lawyer can:

- make any application for you, as the next friend of a person under a legal disability, to the court for an order approving the funding arrangement under the Civil Litigation Assistance Scheme including the payment of a Conditional Fee;
- provide progress reports to the Administrator of the Civil Litigation Assistance Scheme;
- advise the Administrator of the outcome of the proceedings, including details of the judgment amount and recovered costs;
- receive and hold in trust the whole of the judgment amount and recovered costs;
- on demand, deduct and send to the Civil Litigation Assistance Scheme the recovered costs and Conditional Fee.

Change in circumstances
You or your lawyer must tell Legal Aid WA (the Administrator) straight away of any change in your address, financial circumstances or any change in your circumstances that may affect your case.

Change of lawyer
You must get Legal Aid’s permission to change your lawyer. A change is unlikely to be granted without good reason.

Legal costs
Your lawyer must send a Tax Invoice to Legal Aid for all work covered under the Civil Litigation Assistance Scheme.

Non-acceptance of advice
You must follow the reasonable advice of your lawyer, otherwise your grant of aid may be terminated.

Failure to comply
Your grant of aid may be terminated if you do not comply with the CLAS Conditions.

Complaints
If you are concerned about any aspect of the work done on your behalf, please contact your assigned lawyer for assistance. He or she will be able to resolve most difficulties. If you need to make a formal complaint, this should be put in writing and addressed to the Director of Legal Aid. Nothing in the terms of this grant of aid affects any right to redress under the Legal Profession Act 2008.
PERSONAL DETAILS

P1. Title
□ Mr □ Ms □ Mrs □ Miss

P2. First Name

Last Name

P3. Have you used another name with Legal Aid?
If so please give details.

P4. Your sex
□ Male □ Female □ Not Applicable

P5. Date of Birth

P6. Are you in detention, custody or hospital?
□ No □ Yes – Where?

P7. Home Address (even if you are in custody)
street

suburb

P8. Postal Address

P9. Home Phone Number

Work Phone Number

Other Contact Number

P10. Were you born overseas?
□ No □ Yes – What Country

P11. Do you require an interpreter?
□ No □ Yes – Which language

P12. Are you Aboriginal or Torres Strait Islander?
□ No □ Yes

P13. What are your living arrangements?
□ Married □ Married but separated
□ Divorced □ Defacto
□ Widowed □ Defacto but separated
□ Single □ Not applicable

P14. List all your dependants (including details of anyone living with you)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Surname</th>
<th>Date of Birth</th>
<th>Relationship to you</th>
<th>Who do they live with?</th>
</tr>
</thead>
<tbody>
<tr>
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</table>
**FINANCIAL DETAILS**

F1. Do you receive a pension or benefit, excluding family payments?
   - No
   - Yes – Which one (go to question F3)

   Centrelink Number

F2. Are you employed?
   - Yes – what is your Occupation?

   - No – when did you last do paid work?

F3. Do you have someone who supports you financially?
   - No (if on Centrelink benefit go to question F9)
   - Yes – What is your relationship with that person

F4. Please list all weekly income (after tax) received by you or any person who supports you financially.

<table>
<thead>
<tr>
<th>Type</th>
<th>You</th>
<th>Other person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commonwealth/Pension</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Wage/salary</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Business Income</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Workers Compensation</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Superannuation</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Maintenance (child or spouse)</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Rental assistance</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Rental Income</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other (board, overtime, trust income etc)</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

F5. Do any of the following apply to you or any person who supports you financially?
   - Self employed
   - Primary producer (farmer)
   - Director/shareholder
   - Partner in a business
   - Receiving money from a trust/business

F6. What are your weekly housing costs?

<table>
<thead>
<tr>
<th>Rent</th>
<th>$</th>
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</thead>
<tbody>
<tr>
<td>Mortgage</td>
<td>$</td>
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<tr>
<td>Board</td>
<td>$</td>
</tr>
<tr>
<td>Rates</td>
<td>$</td>
</tr>
</tbody>
</table>

F7. Do you have any dependants (children, spouse, relatives) that live with you?
   - No
   - Yes – How many?

F8. Do you or any person who supports you financially pay any of the following:
   - Child support or child maintenance?
     - No
     - Yes – Weekly amount & number of maintenance dependants

   - Spousal maintenance?
     - No
     - Yes – Weekly amount

   - Child care fees so you can attend work/study?
     - No
     - Yes – Weekly amount

F9. What assets do you or any person who supports you financially have?

<table>
<thead>
<tr>
<th>Asset</th>
<th>Value</th>
<th>Owing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other Real Estate</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Motor Vehicle</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Bank Account</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other (shares, boats etc)</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

F10. Have you or any person who supports you financially received or expect to receive any lump sums of money greater that $500 in the last (next) 12 months
   - No
   - Yes – Amount
**LEGAL DETAILS**

This information is to be completed by the lawyer:

<table>
<thead>
<tr>
<th>Full names of all (Proposed) Plaintiff(s):</th>
<th>Full names of (Proposed) Defendant(s):</th>
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<tbody>
<tr>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Court in which action current/proposed:</th>
<th>Defendant's solicitor and firm:</th>
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</table>

<table>
<thead>
<tr>
<th>Date of cause of action</th>
<th>Has liability been admitted? Yes/No</th>
</tr>
</thead>
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<tr>
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</tbody>
</table>

Place (town/state) in which cause of action arose

Has liability been admitted? Yes/No

(If liability denied, please advise reasons given and provide copy of letter from Defendant/Insurer)

<table>
<thead>
<tr>
<th>Cause of action</th>
<th>Details of property search of Defendant(s):</th>
</tr>
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</tbody>
</table>

List other financial resources of defendant(s):

**STAGE/ASSISTANCE REQUIRED**

<table>
<thead>
<tr>
<th>STAGE/ASSISTANCE REQUIRED</th>
<th>YES/NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Further investigation and negotiations of claim</td>
<td></td>
</tr>
<tr>
<td>Commencement of proceedings to pre trial conference</td>
<td></td>
</tr>
<tr>
<td>From pre trial conference up to and including trial</td>
<td></td>
</tr>
<tr>
<td>Briefing of Counsel for trial</td>
<td></td>
</tr>
</tbody>
</table>

**Solicitor’s accompanying letter MUST:**

i) provide full particulars of claim and defence (if known) and a copy of all pleadings drafted or filed to date.

ii) detail investigations undertaken to date and result of negotiations;

iii) list all witnesses for both plaintiff and defendant and provide copies of plaintiff’s proof of evidence and witnesses statements;

iv) attach a copy of important documentary evidence relevant to the claim including expert reports;

v) provide an estimate of quantum of claim;

vi) provide reasons for opinion on liability and quantum;

vii) provide any other relevant information.

**DECLARATION BY APPLICANT**

I ACKNOWLEDGE that:

i. I have received and read a copy of CLAS Conditions.
If assistance is granted, it may be withdrawn at any time as indicated in the CLAS Conditions.

It is an offence to:

• Fail to provide information required of me and which is relevant to this application for legal aid;
• Provide information to Legal Aid WA in connection with this application that is false or misleading;
• Make a false or misleading statement either orally or in writing in relation to this application for legal aid.

I declare that all the information I have given is true and correct.

I agree that if funding is provided to me under the Civil Litigation Assistance Scheme, I will:

i. abide by the CLAS Conditions.

ii. irrevocably authorise my lawyer to receive and hold in their trust account, the whole of the judgment amount and recovered costs, or as a next friend, any amount ordered by the Court to be paid to the Civil Litigation Assistance Scheme and recovered costs.

iii. irrevocably authorise my lawyer (or any subsequent lawyer who acts for me in these matters) to pay to the Civil Litigation Assistance Scheme the Conditional Fee from the monies received pursuant to the assisted litigation without any prior disbursement of such monies to me or any third party.

iv. irrevocably authorise my lawyer or any other subsequent lawyer to repay to the Litigation Assistance Fund, party/party costs recovered by me with respect to work done after the grant of assistance.

I authorise my lawyer to report regularly to the administrator of Civil Litigation Assistance Scheme as required under the CLAS Conditions and to provide any information and documents to the Administrator as requested.

I _______________________________________ of ______________________________________________

declare that all the facts given in this application are true and correct to the best of my knowledge, information and belief.

Signature ________________________________    Date _________________________________________

SOLICITOR’S CERTIFICATE

I ____________________________________ of _____________________________________________________

CERTIFY THAT:

i. I have explained to the applicant the content of the CLAS Conditions and provided him/her with a copy.

ii. I believe that the applicant’s claim is likely to succeed for the reasons given in the accompanying letter.

iii. All particulars and documents known to me and relevant to this application have been disclosed in this application.

iv. The Defendant/s are in a financial position to satisfy any judgment or award obtained (details provided in the accompanying letter).

I UNDERTAKE to promptly notify the Administrator of the Civil Litigation Assistance Scheme as soon as I become aware of any significant changes in the applicant’s means or developments in the litigation.

I AGREE:

• to act for the Applicant in this matter in accordance with the CLAS Conditions;
• to make any application to the court required to ensure the Conditional Fee is paid from any judgment or settlement for a person under a legal disability;
• limit my costs to those allocated by the Civil Litigation Assistance Scheme;
• hold in my trust account the whole of the judgment amount and recovered costs until the CLAS Administrator advises me of the contribution and conditional fee to be paid to Legal Aid WA;
• paid to Legal Aid WA the full amount of the contribution and conditional fee, before releasing the balance to the assisted person.

Solicitor’s signature ____________________________________   Date _____________________