

# Grants of legal assistance

## Guide and application form

### Important information:

1. Read and keep the 'Victoria Legal Aid service information' and 'A guide to a grant of legal assistance' materials contained in the first section.
2. Complete the form contained in the second section.
3. Send the form and relevant documents to Victoria Legal Aid's Melbourne office, addressed to the 'Grants and Quality Assurance Unit'.

**If you need help with this application form, please contact your local Victoria Legal Aid office.**

## Victoria Legal Aid service information

We will:

- be professional and respectful
- listen to you and provide high quality service
- respect your privacy and treat any information you give us as confidential, unless the law says otherwise
- be impartial and open with you when assessing your enquiry or case, and provide a realistic assessment of it
- recognise and respond to any personal, cultural, social, or other issue that may affect your ability to engage with the legal system.

To help us assist you:

- while you are receiving our services, let us know if your details change – such as your address or job
- treat our staff with courtesy
- provide us with all the facts and circumstances of your case and give us any relevant documents as soon as possible
- meet the terms and conditions if you have a grant of legal assistance
- tell us if you are not satisfied with any part of our service or if you have any suggestions about ways we can improve.

### Getting help over the phone

Contact our **Legal Help** phone line for free information about the law and how we can help you. It's open Monday to Friday, 8.45 am to 5.15 pm.

**Call us on 1300 792 387.**

If we can't help you with your legal problem we can refer you to other organisations who can.



You can speak to someone in English or ask for an interpreter. You can also get our Legal Help phone service in several different languages or we can organise an interpreter for you.

More information about our language lines is on our website at [www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au)

### Help for people who are deaf or have a hearing or speech impairment



If you are deaf or have a hearing or speech impairment you can use the **National Relay Service** to call us over the internet on **1300 792 387**. This is a free service.

For more about internet relay see the National Relay Service website at [www.relayservice.gov.au](http://www.relayservice.gov.au)

TTY users can call **133 677** and then ask for **1300 792 387**.

## Victoria Legal Aid office locations

If you need help with the application form, please contact your local office to make an appointment.

### Melbourne

Level 9, 570 Bourke St  
Melbourne VIC 3000  
Tel: 1300 792 387

### Suburban offices

#### Broadmeadows

North-western suburbs  
Level 1, Building 1  
Broadmeadows Station  
Centre  
1100 Pascoe Vale Rd  
Broadmeadows VIC 3047  
Tel: 9302 8777

#### Dandenong

Westernport region  
14 Mason St  
Dandenong VIC 3175  
Tel: 9767 7111

#### Frankston

Peninsula region  
Cnr O'Grady Ave &  
Dandenong Rd  
Frankston VIC 3199  
Tel: 9784 5222

### Ringwood

Outer-eastern suburbs  
23 Ringwood St  
Ringwood VIC 3134  
Tel: 9259 5444

### Sunshine

Western suburbs  
1/474 Ballarat Rd  
Sunshine VIC 3020  
Tel: 9300 5333

### Regional offices

#### Bairnsdale

Gippsland region  
(branch office)  
87A Main St  
Bairnsdale VIC 3875  
Tel: 5153 6444

#### Ballarat

Central highlands region  
Area A, Level 1  
75 Victoria St  
Ballarat VIC 3350  
Tel: 5329 6222  
Toll free: 1800 081 719

### Bendigo

Loddon-Campaspe region  
424 Hargreaves St  
Bendigo VIC 3550  
Tel: 5448 2333  
Toll free: 1800 254 500

### Geelong

Barwon region  
Level 2, 199 Moorabool St  
Geelong VIC 3220  
Tel: 5226 5666  
Toll free: 1800 196 200

### Horsham

Wimmera region  
29 Darlot St  
Horsham VIC 3400  
Tel: 5381 6000  
Toll free: 1800 177 638

### Mildura

Mallee region  
137 Thirteenth St  
Mildura VIC 3500  
Tel: 5005 4001

### Morwell

Gippsland region  
4 Chapel St  
Morwell VIC 3840  
Tel: 5126 6444

### Shepparton

Goulburn region  
320-322 Wyndham St  
Shepparton VIC 3630  
Tel: 5823 6200

### Warrnambool

South Coast region  
185 Fairy St  
Warrnambool VIC  
Tel: 5559 7222  
Toll free: 1800 651 022

## A guide to a grant of legal assistance

Grants of legal assistance are usually for criminal or family matters, but they can also be given in some other matters such as guardianship, infringements, immigration, social security, mental health or discrimination cases.

### Will I get legal assistance?

This will depend on:

- your financial situation using a means test
- what your case is about
- the benefit you are likely to get from your legal case.

### What is the means test?

The means test applies to most adults and considers:

- money you get from work, welfare benefits or other sources
- if you own anything of value, like a house or a car
- your weekly living expenses.

The means test also looks at whether you support anyone else, or if they support you. Your partner's income and assets are usually included when we work out if you are eligible for a grant.

### If I get legal assistance what will the conditions be?

The conditions will be:

- special conditions outlined in the letter you receive from Victoria Legal Aid (VLA)
- standard conditions of legal assistance.

Standard conditions of legal assistance are:

1. You must tell VLA immediately:
  - (a) if you change your address while you are either receiving legal assistance or while you owe money to VLA
  - (b) there is any change in any information in your application
  - (c) there are any other changes that may affect your eligibility.
2. You allow your lawyer to give us any information we need to carry out our functions under the *Legal Aid Act 1978*.
3. Your lawyer must tell us if they receive any money on your behalf.
4. If you receive money following a court case (other than for damages), you must give this money to us.

We may stop or change your legal assistance if you do not follow the terms and conditions of your grant or the advice of your lawyer. You may have to pay some or all the costs of your case up to that point.

### How much legal assistance will I get?

There is a limit on how much VLA will pay on your case. You should check with your lawyer.

### What if I disagree with a decision of VLA?

You can ask us to reconsider most decisions including:

- a refusal to grant you legal assistance
- the conditions on which legal assistance is granted
- a decision to cancel the legal assistance
- the amount and method of paying a contribution.

### How do I request reconsideration?

You or your lawyer must ask VLA to reconsider its decision within 14 days of the decision. You should include reasons why you think we should change our decision. We will send you a letter to let you know if we are changing our decision or it remains the same. If we do not change the decision, the letter will include information about your review rights.

If you are still unhappy with the decision after reconsideration you can write to us requesting a review by an independent reviewer. This is not an officer of VLA.

You must request a review in writing within 21 days of the decision. Independent reviewers make their decision based on your application, your letter, other material in your file and VLA's determinations and guidelines. The independent reviewer's decision is the final decision within VLA.

### Is legal assistance free?

Not always. This will depend on your financial situation.

### How does my lawyer get paid?

VLA pays your lawyer directly. Your lawyer cannot ask you to pay any costs for work done under a grant of legal assistance.

### How do I get more information?

If you want more information on grants of assistance and the whole grants process, you can find it in the VLA Handbook located on our website at <http://handbook.vla.vic.gov.au>

### How do I withdraw the authorisation I have given to VLA to contact Centrelink?

VLA may request information from Centrelink at regular intervals during the life of your legal assistance file. You can withdraw this authorisation at any time by giving notice, in writing, to VLA. However, doing this could affect your eligibility for legal aid.

## Further information

### Collection Notice

We use the information provided on this form to assess your eligibility for legal assistance. Section 23 (5) of the *Legal Aid Act 1978* provides that applicants shall provide us with the information we require to make this assessment. If you do not provide it, we may not be able to assess your eligibility.

We also use the information you provide to update your contact details and to evaluate our services. We also provide statistical information, after removing names of legal assistance applicants, to government to report on how we are fulfilling our obligations to the community.

In accordance with our privacy and confidentiality obligations, we generally do not disclose your information. However, we will sometimes disclose it to assist in the listing of cases at court, to recover costs, to respond to a court order to provide legal assistance or if we are required by law to disclose it.

You can find out more about how we handle personal information in our privacy policy, available on our website at [www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au) or by calling or visiting a VLA office.

You can request access to the information we hold about you, or ask us questions about how we handle your information, by contacting our Internal Legal Services team.

**Tel:** (03) 9280 3789

**Email:** [privacy@vla.vic.gov.au](mailto:privacy@vla.vic.gov.au)

**Write to:** GPO Box 4380, Melbourne VIC 3001

## Feedback and complaints

We aim to resolve complaints quickly and fairly.

Please contact us if you have a complaint about our service, our staff or a private lawyer we fund. Our Internal Legal Services team will listen to your complaint and advise you about how it can be resolved.

**Tel:** (03) 9280 3789

**Email:** [complaints@vla.vic.gov.au](mailto:complaints@vla.vic.gov.au)

**Write to:** GPO Box 4380, Melbourne VIC 3001

### Victoria Legal Aid contacts:

**Victoria Legal Aid** Melbourne office  
Level 9, 570 Bourke St  
Melbourne VIC 3000

Hours: 8.45 am – 5.15 pm Monday – Friday

**Tel:** 1300 792 387

**Fax:** **Grants and Quality Assurance** (03) 9606 5254  
[www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au)

## Our vision

A fair and just society where rights and responsibilities are upheld.

## Our values

### Fairness

We stand up for what is fair.

We aim to be fair when making choices about who and how we help people.

### Care

We care about our clients and the community in which we live.

We look out for and take care of each other.

### Courage

We act with courage backed by evidence about what is best for clients and the community.

We act with courage to be the best we can be.

# Application for grant of legal assistance

Please complete all questions on this form

This form does not contain all of the information you are required to provide when submitting your application for legal assistance. You may need to answer other questions or provide documents. If you have a lawyer assisting you with this application, ask them what additional information to include. Lawyers using this form should refer to the relevant ATLAS template.

## 1. Personal details

Title:  Mr  Mrs  Ms  Miss  Master  Dr  Mr/Mrs  Estate of  Mx

First name ..... Middle name .....

Last name .....

Gender:  Male  Female  Self-described .....  Trans or gender diverse  Prefer not to say

Date of birth ..... / ..... / ..... Is date of birth an estimate only?  Yes  No

Your home address (even if you are in custody) .....

.....

Your postal address (leave blank if same as home address) .....

.....

Are you homeless?  Yes  No

Would you prefer to be contacted by email?  Yes  No

Email address .....

Send all correspondence to your lawyer only?  Yes  No

Home phone ..... Mobile phone .....

Work phone ..... Other contact phone .....

## 2. Additional details

Have you used any other names with Victoria Legal Aid (VLA)?  Yes  No

If **yes**, please list any other name(s) used .....

## 3. Your background

Country of birth .....

If you were not born in Australia, which year did you arrive here? .....

Are you of Aboriginal or Torres Strait Islander origin?

No  Yes, Aboriginal  Yes, Torres Strait Islander  Yes, Aboriginal and Torres Strait Islander

## 4. Language

Do you speak a language other than English at home?  Yes  No (Go to [Question 5](#))

Which language? .....

How well do you speak English?  Very well  Well  Not well  Not at all

Do you need an interpreter?  Yes  No Which language? .....

## 5. Disability and mental health

Do you have a disability?  Yes  No (Go to [Question 6](#))  Not disclosed

What kind of disability? (you can select more than one)

- Acquired brain injury  Chronic illness (e.g. cancer, chronic fatigue, diabetes)  Deafblind  
 Developmental delay (in children)  Learning difficulty (including dyslexia)  
 Mental health issues (psychosocial)  Cognitive (including intellectual disability)  
 Speech and sensory  Blind or vision-impaired  Deaf or hearing-impaired  Physical  
 Neurological (e.g. Alzheimer's, Parkinson's, multiple sclerosis)  
 Neurodiverse (e.g. autism spectrum disorder, attention deficit hyperactivity disorder)

Other: .....

## 6. Employment status

What is your employment status?

- Full time  Part time  Casual  Not employed  Self-employed

## 7. Benefit details

Do you receive a Centrelink benefit or income support?  Yes  No (Go to [Question 8](#))

What is your Centrelink reference number? .....

What type of benefit do you receive?

- Abstudy\*  Age pension\*  Austudy\*  Carer payment\*  
 Disability support pension\*  Newstart allowance\*  Youth allowance\*  Parenting payment\*  
 Partner allowance\*  Sickness allowance\*  Special benefits\*  Veterans/war service  
 Widow allowance\*  Widow B pension\*  Wife pension\*  Other

If you receive one of the benefits **marked with an asterisk**\*: Do you receive the maximum rate of benefit?  Yes  No

## 8. Custody details

Are you in custody or detention?  Yes  No (Go to [Question 9](#))

Custody/detention location .....

Date remanded into custody or detention ..... / ..... / ..... Corrective services ID (not compulsory) .....

## 9. Relationship status

What is your relationship status?

- Single  Living with partner  Married  Separated from partner  
 Married but separated  Divorced  Widowed  Not applicable

## 10. Are you currently experiencing or fleeing family violence?

Yes  No

## 11. Partner details

In this form 'Partner' means spouse or defacto partner, where you have lived together in a genuine domestic relationship for at least 6 months.

The following are examples of when we don't consider you to have a partner for the purpose of the application for legal assistance:

- they have an opposing interest in your legal proceedings; or
- you have recently separated from them; or
- they live overseas and aren't earning income or don't have assets; or
- they are in prison or detention and don't have assets; or
- they have allegedly used family violence against you either in this matter or in the past; or
- you have allegedly used family violence against them either in this matter or in the past; or
- your relationship with them may be damaged if they knew about your legal issue.

Do you have a partner?  Yes  No

Does your partner receive a Centrelink benefit or income support?  Yes  No

If **yes**, what type of benefit do they receive?

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Abstudy*                    | <input type="checkbox"/> Age pension*        | <input type="checkbox"/> Austudy*          | <input type="checkbox"/> Carer payment*       |
| <input type="checkbox"/> Disability support pension* | <input type="checkbox"/> Newstart allowance* | <input type="checkbox"/> Youth allowance*  | <input type="checkbox"/> Parenting payment*   |
| <input type="checkbox"/> Partner allowance*          | <input type="checkbox"/> Sickness allowance* | <input type="checkbox"/> Special benefits* | <input type="checkbox"/> Veterans/war service |
| <input type="checkbox"/> Widow allowance*            | <input type="checkbox"/> Widow B pension*    | <input type="checkbox"/> Wife pension*     | <input type="checkbox"/> Other                |

If they receive one of the benefits **marked with an asterisk\***:

Do they receive the maximum rate of benefit?  Yes  No

## 12. Dependant details

In this form, 'dependant' means: A person who relies on you for financial support including children or elderly parents.

Do any dependants live with you?  Yes  No

When answering this question, you need to:

- list those people that are not listed as your partner in [Question 11](#); and
- include only those people who live with you.

Names of dependants:

First name	Last name	Relationship to you	Date of birth
			/ /
			/ /
			/ /
			/ /
			/ /
			/ /

Do you or your partner pay child support/maintenance?  Yes  No

How many children/maintenance dependants is the payment for? .....

### 13. Your income (before tax)

	You	Your partner	Frequency
Pensions/benefits/allowances (excluding Family Tax Benefit)			
Income – employment			
Business / self-employed			
Child support			
Other			
<b>Total income</b>			

### 14. Expenses

	You	Your partner	Frequency
Income tax			
Rent			
Mortgage			
Board			
Rates			
Business expenses			
Child care			
Child support / child maintenance / Spousal maintenance /			
<b>Total expenses</b>			

### 15. Assets

	You	Your partner
Home		
Home mortgage		
Other real estate		
Other mortgage		
Farm / business		
Farm / business mortgage		
Motor vehicle		
Motor vehicle loan		
Cash / savings		
Other assets ( <i>please specify</i> )		
<b>Total assets</b>		

Have any of your assets been seized, frozen or restrained by the police or the court?  Yes  No



Please provide copies of all relevant court orders. Please provide full details of the assets in the above table



## Business

Are you or your partner:

- |                                    |                              |                             |  |                              |                             |
|------------------------------------|------------------------------|-----------------------------|--|------------------------------|-----------------------------|
| Self employed                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No | A partner or director in a business or company         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| A shareholder in a private company | <input type="checkbox"/> Yes | <input type="checkbox"/> No |  |                              |                             |
| Receiving money from a trust       | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Receiving any other benefit from a business or company | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If **yes** to any of the above, please provide details .....

.....



If you have any interest in a business or farm, you will need to provide profit and loss accounts for the past 12 months; tax returns for the last financial year; and bank statements for the past three months

## 16. Other parties

For some disputes (for example, a family law matter) VLA may use the information provided in this section to contact the other party to attempt appropriate dispute resolution.

Are there other parties to this matter?  Yes  No (Go to [Question 17](#))

If **yes**, specify whether the other party is:  A person  An institution

If the other party is an **institution**, please provide details:

Name of institution .....

If the other party is a **person**, please provide details:

Title:  Mr  Mrs  Ms  Miss  Master  Dr  Mr/Mrs  Estate of  Mx

First name ..... Middle name .....

Last name .....

Gender:  Male  Female  Self-described .....  Not applicable

Date of birth ..... / ..... / ..... Is date of birth an estimate only?  Yes  No

Phone ..... Mobile .....

Email address .....

Address .....

.....

Please describe the other party's relationship to you:

- |   |                                 |                                     |                                  |                                      |
|---|---------------------------------|-------------------------------------|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Spouse/partner | <input type="checkbox"/> Child  | <input type="checkbox"/> Ex-spouse  | <input type="checkbox"/> Sibling | <input type="checkbox"/> Grandparent |
| <input type="checkbox"/> Grandchild     | <input type="checkbox"/> Parent | <input type="checkbox"/> Co-accused | <input type="checkbox"/> Other   |                                      |

Please describe the other party's role in these proceedings:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Applicant/plaintiff/appellant | <input type="checkbox"/> Accused/defendant/respondent | <input type="checkbox"/> Interested party |
| <input type="checkbox"/> No court proceedings          | <input type="checkbox"/> Other                        |   |

## Details of other party's lawyer

Name of firm .....

Phone ..... Fax .....

Email address .....

Postal address .....

## 17. Court hearings

Are there any proceedings?  No (*Go to Question 18*)  Yes, current  Yes, intended

When is the next hearing date? ..... / ..... / .....

Which court/tribunal do you have to go to? .....

What is your role in these proceedings?

- Applicant/plaintiff/appellant  Accused/defendant/respondent  Interested party  
 No court proceedings  Other

What type of hearing is it?

- Appeal  Summary hearing  Indictable hearing  
 Family law hearing  Civil application  Mediation/alternative dispute resolution (ADR)  
 No hearing  Other (*please specify*) .....

Court proceedings number (*not mandatory*) .....

## 18. Payment of fees

Have you or any other person paid any of your legal fees for this case?  Yes  No

*If yes*, name of the person who paid the legal fees .....

Relationship to you ..... Amount paid .....

If another person has paid previous fees in this matter, please fully outline the reason why this person cannot continue to pay your legal costs:

.....  
.....  
.....



*Please provide copies of receipts and bank statements if you have paid any legal fees for this case*

## 19. Your lawyer

Who do you want as a lawyer? .....

Firm's name and details .....

.....  
.....

*If you have a lawyer assisting you with this application, we recommend that you ask the lawyer to submit the application on your behalf.*

## 20. Your legal problem

What type of law applies to your legal problem?

- Criminal law  Family law  Family violence  
 Civil law (*please specify, eg. inquest, discrimination*) .....

Are any of the following factors relevant to your legal problem?

- Family violence – victim/survivor  Family violence – alleged perpetrator  Ice  Alcohol  Drugs

## 21. Describe your legal problem

Please provide details of your legal problem:

*For criminal matters, please provide details of the charges; for family matters and family violence matters, please specify the issue(s), the background, and the orders being sought (eg. residence of children).*

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Please provide copies of any relevant documents

*If you have a lawyer that you wish to act on your behalf, Questions 21, 22, 23 and 24 must be completed by that lawyer. If you do not have a lawyer, you are not required to complete Questions 21, 22, 23 and 24.*

## 22. Please identify and address the VLA guideline under which assistance is being sought

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Help: please see the VLA Handbook at <http://handbook.vla.vic.gov.au>

## 23. Please set out the merits of the application

*(This question does not need to be completed in indictable matters)*

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## 24. Please outline the detriment to the applicant if this application is refused

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Help: please see the VLA Handbook at <http://handbook.vla.vic.gov.au>

## 25. Criminal prosecutions only

Do you have any prior convictions?  Yes  No

If **yes**, please outline .....

Year ..... Offence ..... Penalty .....



Please provide charge sheets, prosecution summary and conviction history sheets if available

## 26. Criminal appeals only

Do you wish to appeal a conviction?  Yes  No

Do you wish to appeal against a sentence?  Yes  No

Please provide details .....

Which court made the decision? .....

What was the date of the original decision? ..... / ..... / .....

## 27. Family law matters only (including child protection matters)

### Details of children

Are there any children relevant to your legal problem?  Yes  No

If **yes**, give details:

#### Child 1:

First name	Middle name	Last name	Male/female/other
Date of birth	Relationship to you	Who does the child live with?	Since when?
/ /			/ /

#### Child 2:

First name	Middle name	Last name	Male/female/other
Date of birth	Relationship to you	Who does the child live with?	Since when?
/ /			/ /

#### Child 3:

First name	Middle name	Last name	Male/female/other
Date of birth	Relationship to you	Who does the child live with?	Since when?
/ /			/ /

#### Child 4:

First name	Middle name	Last name	Male/female/other
Date of birth	Relationship to you	Who does the child live with?	Since when?
/ /			/ /

**Child 5:**

First name	Middle name	Last name	Male/female/other
Date of birth	Relationship to you	Who does the child live with?	Since when?
/ /			/ /

**Existing orders**


Are there any current family law or child orders in relation to this matter?  No  Yes, interim  Yes, final

If **yes**, date of order ..... / ..... / .....

Court or tribunal which made the order?

Children's Court  Family Court  Federal Magistrates Court  Magistrates' Court of Victoria

Type of order:  Family law  Child support  Family violence  Child welfare

 Please provide copies of these orders

**Details of dispute**

Did you live with the other party?  Yes  No

If **yes**: Date of marriage ..... / ..... / ..... Date de facto relationship started ..... / ..... / .....

Date of separation ..... / ..... / ..... Date of divorce ..... / ..... / .....

Have you attended family dispute resolution with a registered family dispute practitioner?  Yes  No

*VLA offers a service called Victoria Legal Aid Family Dispute Resolution Service. We usually require applicants for family law assistance to attend this service.*

If you do not wish to attend Victoria Legal Aid Family Dispute Resolution Service before starting court proceedings, please provide reasons as to why you consider the service is not appropriate:

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.....

.....

.....

**Safety fears**

Do you fear for your safety?  Yes  No

Do you fear for the safety of the children?  Yes  No

Are there any current investigations about child abuse?  Yes  No

Is there a family violence order in place for your protection?  
 No  Yes, interim  Yes, final

Is there a family violence order in place for the protection of children relevant to these proceedings?  
 No  Yes, interim  Yes, final

If **yes**, what is your role in the family violence order for the protection of the children?

Applicant/plaintiff/appellant  Accused/defendant/respondent  Interested party  
 No court proceedings  Other

## 28. Applicant declaration

I, .....

of .....

- (i) acknowledge that it is an offence to:
- fail to disclose information required of me and which I know to be relevant to this application for legal assistance
  - provide false information to Victoria Legal Aid directly or via my legal practitioner in connection with this application for legal assistance
  - make a false statement either orally or in writing in relation to this application for legal assistance
- (ii) have received a copy of Victoria Legal Aid's privacy statement
- (iii) consent to the submission of the application for legal assistance by electronic means to Victoria Legal Aid via the ATLAS grants management system.

## Centrelink consent and authority

I, .....

Authorise:

- Victoria Legal Aid to use Centrelink Confirmation eServices to perform a Centrelink enquiry of my customer details and concession card status to enable the business to determine if I qualify for a concession, rebate or service
- Services Australia to provide the results of that enquiry to Victoria Legal Aid.

I understand that:

- Services Australia will disclose my personal information to Victoria Legal Aid including my name, address, payment status, payment type and amount to confirm my eligibility for legal assistance
- this consent, once signed, remains valid while I am a customer of Victoria Legal Aid unless I withdraw it by contacting Victoria Legal Aid or Services Australia
- I can obtain proof of my circumstances/details from Services Australia and provide it to Victoria Legal Aid so that my eligibility for legal assistance can be determined
- if I withdraw consent or do not alternatively provide proof of my circumstances/details, I may not be eligible for the grant of aid provide by Victoria Legal Aid.

Your signature ..... Date ..... / ..... / .....

**Note:** For applications completed by third parties (including practitioners) on behalf of an Applicant, Centrelink requires confirmation of identity.

Confirmation of the Applicant's identity was undertaken by ..... by way of:

- verbal communication
- written/electronic communication

## 29. Proof of means

*Please note, the means test does not apply if you are seeking a grant for a review of a crimes mental impairment matter; or seeking a grant for a war veteran's matter; or are 18 years or younger and are seeking a grant of a Children's Court or Commonwealth Family Law matter.*

Are you seeking a waiver of the obligation to provide proof of means?  Yes  No

If **yes**, I seek a waiver on the following basis: *(please tick whichever applies)*

- I am in custody or detention and have savings and investments less than or equal to \$1095
- I am in custody or detention and I am applying for assistance for a bail application
- I am in custody or detention and I am applying for assistance for a summary crime proceeding that will be heard and determined within seven days of the date of my application for legal assistance
- I am of Aboriginal or Torres Strait Islander origin

- I am experiencing or fleeing family violence
- I am homeless
- I live in a remote location\*

## ✓ Your checklist

### Before you send in the application, check you have:

- Answered all relevant questions
- Attached copies of all financial documents relevant to your case (eg. bank statements, payslips, tax returns, pension or health care cards)
- Attached copies of all other/court/legal documents relevant to your case (eg. court orders, charge sheets)
- Signed the 'Applicant declaration' and 'Centrelink consent and authority'

\* Remote location is described by the Australian Taxation Office as being both more than 100km from a large metropolitan area with more than 130,000 people and more than 40km from a large regional town of more than 14,000 people, as of the 1981 census.

The following is the list of Victorian towns that are classified as remote:

Alexandra	Dimboola	Maffra	Rutherglen
Ararat	Donald	Mansfield	St Arnaud
Avoca	Echuca-Moama	Maryborough	Sale
Bairnsdale	Euroa	Mirboo North	Seymour
Beaufort	Foster	Mortlake	Stawell
Benalla	Hamilton	Mount Beauty	Stratford
Bright	Heathcote	Myrtleford	Swan Hill
Camperdown	Heyfield	Nagambie	Terang
Casterton	Heywood	Nathalia	Tongala
Charlton	Horsham	Newhaven	Wahgunyah-Corowa
Cobden	Inverloch	Nhill	Warracknabeal
Cobram	Kerang	Orbost	Wonthaggi
Cohuna	Koondrook-Barham	Ouyen	Yarram
Colac	Korumburra	Paynesville	Yarrowonga-Mulwala
Coleraine	Lakes Entrance	Portland	
Corryong	Leongatha	Robinvale	
Cowes	Lorne	Rochester	

# Grants of legal assistance

Guide and application form

## Victoria Legal Aid

For help with legal problems, call Legal Help on **1300 792 387**

### Offices

Melbourne

#### Suburban offices

Broadmeadows

Dandenong

Frankston

Ringwood

Sunshine

#### Regional offices

Bairnsdale

Ballarat

Bendigo

Geelong

Horsham

Mildura

Morwell

Shepparton

Warrnambool