

Part 1

About you:

Mr/Mrs/Miss/Ms/Other _____

Your forename(s) _____

Your surname or family name _____

Your date of birth _____

Your National Insurance Number _____

Your Application Registration Card (ARC) Number _____

Contacting you:

Your usual home address _____

_____ Postcode _____

To what address should we write to you? Your usual home address /this address _____

_____ Postcode _____

Your email address _____

Your telephone number (landline) _____

Your mobile phone number _____

Is your usual home address :

Rented (Tenancy) Temporary Your Parents Home (you live with them)

Someone elses home → your relationship

Owned by: you Your partner You and your partner jointly

Do you have a partner? Yes No

Are you married or in a civil partnership? Yes No

Are you cohabiting or living together? Yes No

Are you single/widowed/divorced or have dissolved a civil partnership/separated – date of separation _____

About your partner

Mr/Mrs/Miss/Ms/Other title _____

Their forename or other names _____

Their surname or family name _____

Their date of birth _____

Their National Insurance Number _____

Their Application Registration Card (ARC) Number _____

Is your partner a victim, prosecution witness or co-defendant in the case for which you require legal aid? Yes or No _____

If yes are they a victim/prosecution witness/co-defendant _____

If they are a co-defendant do they have a conflict of interest? Yes or No _____

If your partner's usual home address is different from yours what is it? _____

_____ Postcode _____

Your income

Do you or your partner receive any of these benefits – Income Support, Income-related Employment and Support Allowance (ESA), Income-based Jobseeker's Allowance (JSA), Guaranteed State Pension Credit.

Yes No

If yes which do you or your partner receive and if you receive JSA when did you or your partner last sign on _____

Do you or your partner together in a year have a total income from all sources before tax or any other deduction of more than £12,475 (£239.90 a week)- Yes or No _____ *

Are you or your partner self-employed in a business partnership or either a company director or a shareholder in a private company – Yes or No _____ *

Do you or your partner have any income, savings or assets which are under a restraint order or a freezing order – Yes or No _____ *

Do you or your partner own or part-own any land or property of any kind, including your own home, in the United Kingdom or overseas – Yes or No _____ *

Do you or your partner have any savings or investments in the United Kingdom or overseas – Yes or No _____ *

NB: If you answered yes to any of the above questions marked with a * you will need to complete Part 2 of this form, please go to page 4. If you answered no to all of the questions marked with * please complete Part 1 only.

Sources of income for you and your partner. Please give details in the table:

	You		Your Partner	
Employment (wage or salary)	£	Every	£	Every
	<input type="checkbox"/> Before Tax	<input type="checkbox"/> After Tax	<input type="checkbox"/> Before Tax	<input type="checkbox"/> After Tax
Child Benefit	£	Every	£	Every
Working Tax Credits and Child Tax Credits	£	Every	£	Every
Universal Credit	£	Every	£	Every
Total of other Benefits	£	Every	£	Every
Maintenance Income	£	Every	£	Every
Pensions	£	Every	£	Every
Any other source of income such as:	£	Every	£	Every
<ul style="list-style-type: none"> • A student grant or loan • Board or rent from a family member, lodger or tenant, or rent from a property • Financial support from friends and family 	Source:		Source	

Do your answers to the previous questions tell us that you have no income from any of the sources which we have asked you about?

No Yes → How do you and your partner pay your bills and daily expenses?

Part 2

Are you, or your partner, an employee (employed by someone else)?

No Yes →

	You	Your Partner
Employers Name		
Employers full address, including the postcode		
Job title, or briefly describe the job		
Salary or wage	£ Every	£ Every
	Details :	Details:
Deductions :		
Income Tax	£ Every	£ Every
National Insurance	£ Every	£ Every
Any other deduction	£ Every	£ Every
	Details:	Details:

Are you or your partner self-employed, employed in a business partnership, or employed as either a company director or a shareholder in a private company?

No Yes →

	You	Your Partner
Self-employed: The number of businesses		
Business partnership:		

The number of partnerships		
Director or Shareholder: The number of private companies		

Have you or your partner received a self-assessment tax calculation sheet from HM Revenue and Customs telling you about your tax liability, within the last 2 years?

No Yes →

The tax liability	£	Every	£	Every
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About the first or only business, partnership, directorship or shareholding which you told us about in the question above – please give details in the table below:

	You		Your Partner	
Total turnover over the last 12 months	£	Every	£	Every
Total drawings over the last 12 months	£	Every	£	Every
Total profit over the last 12 months	£	Every	£	Every
Percentage share of profit	£		£	
Total income from share sales	£		£	
The trading name of the business partnership				
The trading address or registered address				

In business with anyone else No Yes → their name(s) No Yes → their name(s)

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How many people work for the business?

The date when the business started trading ___/___/___

Do you or your partner receive from work any benefit that is not money – such as a company vehicle, relocation payments, vouchers for childcare, or private health insurance?

No Yes →

	You	Your Partner
The total amount you each receive	£ Every	£ Every

Do you or your partner receive a private pension, or a pension from an employer?

No Yes →

	You	Your Partner
Total pension before tax	£ Every	£ Every

Do you or your partner receive maintenance payments for anyone in your household?

No Yes →

	You	Your Partner
The total amount you each receive	£ Every	£ Every

Do you or your partner receive the State Pension or any of the benefits listed here?

No Yes →

	You	Your Partner
State Pension	£ Every	£ Every
Child Benefit	£ Every	£ Every
Working Tax Credits and Child Tax Credits	£ Every	£ Every
Universal Credit	£ Every	£ Every
Incapacity Benefit	£ Every	£ Every
Industrial Injuries Disablement Benefit	£ Every	£ Every
Contribution-based Job Seekers Allowance	£ Every	£ Every
Other benefits (except housing benefit)	£ Every The Benefit:	£ Every The Benefit:

When you answered the question above did you say you or your partner received child benefit?

No Yes → At their next birthday, how many children will be aged:

1 year 2-4 5-7 8-10 11-12 13-15 16-18

Do you or your partner receive any income from the sources listed here?

No Yes →

	You	Your Partner
Student grant or loan		
Board or rent from a family lodger or tenant		
Rent from another property		

Financial Support from anyone else or from someone who allows you to use assets or money		
Income from any other source which you have not stated in questions above. Please explain		
Total amount received from all sources in this questions:	£ Every	£ Every

Do you or your partner receive interest or income from any savings or other investment?

No Yes →

	You	Your Partner
The total amount you each receive from all investments	£ Every	£ Every

Do your answers to the previous questions tell us that you have no income from any of the sources we have asked about?

No Yes → How do you and your partner pay your bills and daily expenses?

Your outgoings and your partners outgoings

For the place where you usually live, do you or your partner pay:

Rent Mortgage Board and Lodgings None of these

What is the total amount you and your partner, together, pay for the rent or mortgage, after taking away housing benefit?

£ Every

For your usual home address, what is the total amount that you and your partner, together, pay for council tax?

£	Every
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If you usually pay for board and lodgings:

How much do you and your partner, together, pay for the board and lodgings?

£	Every
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How much of the amount you pay for board and lodging is for food?

£	Every
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The name of the person who you pay for your board and lodgings?

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Your relationship to the person who you pay?

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Do you or your partner pay childcare costs to a registered care provider for any children who live with you?

No Yes → The total amount which you and your partner, pay for child care?

£	Every
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Do you or your partner pay maintenance to any ex-partners, or for any children who do not live with you or your partner?

No Yes → The total amount which you and your partner pay for maintenance?

£	Every
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Do you or your partner pay any contributions towards civil or criminal legal aid?

No Yes → The total amount which you and your partner pay for legal aid?

£	Every
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Criminal Case reference or Civil Certificate number (or both)

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In the last 2 years have you or your partner paid income tax at the 40% rate?

No Yes → You Your partner

Do you or your partner own or part own land or property of any kind including your own home, in the United kingdom or overseas?

No Yes → You Your partner you & your partner jointly

How many pieces of land?

How many properties

Does your answer to the questions above include an address which is not the usual home address of you or your partner?

No Yes → The address and postcode if applicable

Postcode

(if there are other properties or pieces of land, give the addresses and postcodes if applicable on a separate sheet)

About land or a property that is a usual home address, or has an address which you gave above

Your answers to 1 – 5 are for : your usual home address

your partners usual home address

an address at question

1. The percentage of the property or land which you and your partner own?

You % Your partner %

2. Does anyone else own a share of this property or land?

No Yes → Their name(s) and relationship to you

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3. Is there a mortgage which has to be paid off?

No Yes → Total amount owing

£

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4. What is the estimated market value of this property or land?

£

5. Type of property

Residential Terraced Bungalow Detached semi-detached

Flat or Maisonette other type → please explain below

Number of Bedrooms

Commercial:

What is the commercial property used for?

Land:

Size

Acres

How is the land used?

Do you or your partner have any of these in the United Kingdom or overseas?

(if you ✓ yes for any type of saving give details about it in the table below)

Bank Accounts: No Yes Cash ISA's No Yes

Building Society Accounts: No Yes National savings/Post Office: No Yes

Any other cash investments: No Yes

Name of Bank or Building Society	Sort Code	Account Number	Account Type	Balance (state clearly if in credit or debit)	Whose name account is in (you, your partner or joint)

Is the salary, wages or benefits of your or your partner paid to one of the accounts?

No Yes → Name of bank, building society or other holder of the savings

You		partner	
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Do you or your partner have any Premium Savings Bonds?

No Yes →

Holder Number	Holder number
Total value of the Premium Savings Bonds	£

Do you or your partner own any of these investments, in the United Kingdom or overseas?

	No	Yes
Stocks, including gilts and government bonds		
Shares		
Personal Equity Plans (PEPs)		
Share ISA's		
Unit Trusts		
Investment Bonds		
Other lump sum investments		

Describe each investment

	£ Value

Do you or your partner stand to benefit from a trust fund in the United Kingdom or overseas?

No Yes →

The amount held in the fund £	The yearly dividend £ a year
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Do you or your partner have any income, savings or assets which are under a restraint order or a freezing order?

No Yes → You Your partner

Do you, by yourself or with anyone else own a motor vehicle?

No Yes → Provide the registration number(s)

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Which of the options in the table best describes you? (tick as applicable)

White	Mixed	Asian or Asian British	Black or Black British	
British	White and Black Caribbean	Indian	Black Caribbean	Chinese
Irish	White and Black African	Pakistani	Black African	Gypsy or Traveller
White other	White and Asian	Bangladeshi	Black other	Other
	Mixed other	Asian other		I prefer not to say

Do you consider that you have a disability?

No Yes → The best definition is

Mental health conditions	Mobility impairment	Other	
Learning disability or difficulty	Longstanding physical illness or health conditions	I prefer not to say	
Hearing impaired	Visually impaired	Deaf	Blind

