#### File Number

1.

**APPLICANT:** 

# **ACT CIVIL AND ADMINISTRATIVE TRIBUNAL**



REQUEST ABOUT PAYMENT OF FEES

The appropriate YES or NO boxes must be marked: [X].

Please use whole dollars eg: \$25 not \$24.65. Income and expenses are to be calculated on a fortnightly basis.

Name	,•		
Tvanic	·•	-	
Addre	ess:	-	P/code:
Occup	oatic	on :	
I ask t	hat	paym	ent of the fee of \$
[]			rred for a period of days  oplicant – now complete Section B only
[]			tted or refunded pplicant – now complete Section C only
[]		waiv te to ap	ed oplicant – now complete Section A only
REQ	UES	ST TO	) WAIVE FEE
The R	legis	trar n	nust be satisfied payment of the fee would cause you hardship
Are y	ou c	urren	tly employed?
YES	[	]	(if "yes", please complete this section)
NO	[	]	(if "no", please go to 3. OTHER INCOME)
I am e	empl	oyed	by:

			P/Code:
Му і	ncon	ne after t	tax is \$00 per fortnight.
OTE	IER	INCOM	ME:
Do y	ou re	eceive ar	ny other income additional to that shown above?
YES	]	]	(if "yes", please complete this section)
NO	[	]	(if "no", please go to 4. EXPENSES)
myse bene	elf or fits,	my chil	ner income I receive including any maintenance payments f ldren, Family Allowance, other social security or repatriation, rent or board from people living in the same premises as
NAT	URI	E OF IN	NCOME:
			TOTAL INCOME (Sections 2 & 3)
			TOTAL INCOME (Sections 2 & 3) \$ Per fortnight
My I	Pensi	on/Bene	
·			\$ Per fortnight
EXP	PENS	SES:	\$ Per fortnight
<b>EXP</b> I hav	PENS	SES: dep	\$ Per fortnight  efit number is:

	Rent/Board/Mortgage:		\$				
	Credit Card/HP/Loan repayments:		\$				
	Living expenses - food, clothing etc: - fares, gas electricity, phone		\$ \$				
	Other		\$				
		TOTAL EXPENSE	<b>ES</b> \$				
5.	SAVINGS:						
	Do you have any savings?						
	YES [ ] (if "yes	s", please complete t	his section)				
	NO [ ] (if "no	", please go to 6. OT	HER ASSETS)				
	The details of my back accounts, accounts, investment accounts etc accounts by putting [J] next to the a	are as follows: (	•				
ACCOUNT	NUMBER:	NAME OF INSTIT	ΓUTION:				
6.	OTHER ASSETS:						
	Do you have any other assets?						
	Assets can be things like a block of land, houses, cars, boats, shares etc.						
	YES [ ]	(if "yes", please cor	mplete this section)				
	NO [ ]						

The assets I have are as follows:

(If ownership of any of your assets is shared with another person show what share you have, eg: Half share in....)

ION OF ASSETS

ESTIMATED NET VALUE:

DESCRIPTION OF ASSETS	ESTIMATED NET VALUE:
	\$
	\$
	\$
	Φ.
	\$

### 7. OTHER DEBTS AND COMMITMENTS:

Do you have	any	oth	er debts or financial commitments not shown above?
YES	[	]	(if "yes", please set these out on a separate sheet and attach it
NO	[	]	

8. IS THERE ANY OTHER INFORMATION ABOUT YOU OR YOUR DEPENDANTS' CIRCUMSTANCES WHICH YOU BELIEVE SHOULD BE TAKEN INTO ACCOUNT IN DECIDING YOUR REQUEST?

YES	[	]	(if "yes", please set these out on a separate sheet and attach it)
NO	[	]	(if "no", go to 9. DECLARATION)

# B. DEFERRAL OF PAYMENT OF FEE

If a payment of a fee or charge, in whole or in part, is not able to be made at the time of the request the Registrar of the ACAT may defer the payment for a period up to 14 days or longer if, in the Registrar's opinion, it's in the interests of justice to do so.

Explanation of, and reasons why, Fees/Charges should be waived

Remit	or Refund of Fee	
of the	ACAT may remit or ref	tice, or the circumstances warrant, the Reg und a fee or charge in whole or in part for to provision of a facility or service.
Explar	ation of, and reasons	why, Fees/Charges should be refunded
DECL	ARATION:	
I decla	e that to the best of my	knowledge and belief the information set
		t, where any estimate is given, it is given in
	Applicant's signature:	
	Date:	

# FOR TRIBUNAL USE ONLY:

Date:

The application fee to which this request relates is, pursuant to Section 15(2)(b) of the Court Procedures Act 2004, (circle appropriate)

waived / not waived
be deferred for a period of days
be remitted or refunded
Deputy Registrar