

# Request for Exemption from Paying Fees for ACT Courts or ACAT matter

This form refers to the *Court Procedures Act 2004 s 15(2)(a)* (Remission, refund, deferral, waiver and exemption of fees) and *Legal Aid Act 1977 s 93*

**Use this form if:**

- You are the person named on a Commonwealth-issued Health Care Card, Low Income Health Care Card or Pensioner Concession Card.
- You are legally assisted under a scheme or service provided or approved by the Attorney-General which includes the services of Aboriginal Legal Service (NSW/ACT) Limited, Canberra Community Law Limited including Street Law and Women's Legal Centre (ACT & Region) Incorporated.
- You are legally assisted under Legal Aid.

When returning your completed application form to the registry you will need to attach photocopies of documentary evidence of any of the above (such as your Health Care Card, legal assistance provider letter or Notice of Representation) to support your claim. Photocopy both sides of the card or other document if it has writing on both sides. The registry will contact you if more supporting information is required.

**You must notify the Registry if there is any change to your circumstances that alters the information given in this request while the Court or ACAT are dealing with your case.**

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**Applicant Details**

**File number:**

Given name

Family name (surname)

Street address

Suburb

State

Post code

Email address

Telephone number (best number to reach you on)

**Reason for seeking exemption to pay a fee:**

**(tick applicable)**

I am named on a current Commonwealth-issued:

Health Care Card

Pensioner Concession Card

Low Income Health Care Card

I am legally assisted under an approved scheme or service being:

Aboriginal Legal Service (NSW/ACT) Limited

Canberra Community Law Limited, including Street Law

Women's Legal Centre (ACT & Region) Incorporated

Legal Aid

Signature of applicant:

Date:

I have attached a copy of my concession/pensioner card or legal assistance letter.

I have a digital concession/pensioner card.

I have attached a Notice of Representation by an approved scheme or service.

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**Office use only:** Exemption Granted      Exemption not granted      Reason

Signature of Registrar/Deputy Registrar

Date:

Digital wallet version of current concession/pensioner card sighted by ACAT Staff Member