

Application for Pro Bono Assistance (Organisations)



FILE NO. PBCH /20

Office use only

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Whilst being assessed and referred, the information that you supply in this application will be treated confidentially. **Please cross out any sections that do not apply to you.**

1. Details of your Organisation

Legal Name of Organisation:	
Type of Organisation: Please state whether you are a company, an incorporated association or an unincorporated association	
Date of incorporation or commencement of your organisation's activities	
Address:	Post Code: _ _ _ _
ABN	
Contact Details:	Work: _____ Mobile: _____ Email: _____

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<p>The primary purpose of the organisation and main activities:</p> <p>Please state in what respects your organisation's purposes are primarily charitable (eg: health, education, social justice, etc)</p>	
<p>Name and contact details of person applying on behalf of the organisation:</p> <p>If not evident from your position, please state the source of your authority to seek legal assistance on behalf of your organisation.</p>	<p>Name:</p> <p>Position:</p> <p>Tel. No:</p> <p>Source of my authority to seek legal assistance on behalf of the organisation:</p>
<p>To what, if any, extent does your organisation pursue its purposes outside of Australia?</p>	
<p>Please provide the names of:</p> <ul style="list-style-type: none"> • any related or parent organisations, and • industry or peak bodies of which you are a 	

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member	
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2. Your Organisation's Income and Expenditure

Are you a not-for-profit organisation?	
Please state any income tax concessions the organisation possesses (such as tax deductible gift recipient status, income tax exemption, public benevolent)	
If possible, please include the organisation's latest annual report (incl. financials)	

If you are an established organisation, please provide the following income and expenditure details based on your latest audited financial statements. Otherwise, please provide an estimate based on the organisation's income for the current year]

Please provide the following income details:

Donations	
Other Fundraising Activities	

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Membership Subscriptions	
Government funding and grants	
Receipts from business/program activities	
Other income	
Total income	

3. Your Organisation's Assets

Please complete the following table stating what capital assets (eg: properties, vehicles, stocks and shares, cash in bank accounts and other investments) your organisation owns and how much they are worth.

Asset:	Details (including purpose for which the organisation currently uses the asset)	Estimated Value (if known) \$

4. Details of any court action in which your organisation is currently involved

4.1	Is your organisation involved in any current court action(s)?	Yes / No (<i>please circle</i>) (If No, go to question 5.1)		
4.2	Number of the Court Action		Year of the Action	
	Court:			

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Name of solicitors currently acting for you	
If applicable: Please provide a brief explanation of why the solicitors named above are unable to continue acting for you in relation to the matter that is the subject of this application:	
Next Court date:	
Are you likely to receive any money from the Court Action?	Yes / No (<i>please circle</i>) (If No, go to question 5.1 below)
Your estimate of the amount you will receive:	

5. Details of legal assistance sought by your organisation

Please note that providing the following information and attaching explanatory or supporting documentation may assist the Clearing House to assess your application. However, while the Clearing House will treat the information you provide in, or attach to, this application as confidential; it is not able to claim legal professional privilege in relation to that information. This means that while the Clearing House possesses your information it could be compelled to present some or all of your information to a court for use in legal proceedings against you or another person. The Clearing House will possess your information until it has assessed your application and either referred your matter to a lawyer or returned the information to you.

5.1	Please provide a brief description of what legal representation or assistance your organisation requires and any timeframe(s) that you need to meet:
5.2	Please provide details of all other person(s) or organisation(s) affected by, or involved with, the matter. Attach additional page(s) if insufficient space provided.
Each person or organisation's name and address.	1. 2.

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	Name of each other parties' solicitor, if known.	
	Details of any Insurance Company involved:	
5.3	Court or Tribunal in which action commenced or proposed if applicable:	
5.4	Please provide details of any lawyers or law firms that have acted for you in the past 2 years, including the type of work they performed for you, whether that work was performed on a no fee or reduced-fee basis and whether you have approached them in relation to this matter	
5.5	Your organisation may attach any documentary evidence available to it that the organisation believes supports its case.	

6. Help your organisation has already tried to obtain

6.1	Has your organisation sought other relief/advice from any other source? (eg: a Community Legal Centre)?	Yes/No (If No, go to question 6.3)
6.2	Who did you seek assistance from:	
	What assistance did you seek:	

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7. Checklist

Please check that you have:

- Fully completed the application form, including the statutory declaration.
- If applicable and you elect to provide these documents to the Clearing House, please check that you have attached copies (not originals) of:
 - Any court documents filed to date in respect of the matter, and
 - Any other documents and correspondence relating to the subject matter of the application, including your organisation's latest annual report.

If you do not have access to a photocopier, the Law Society Northern Territory may be able to photocopy the documents relevant to Clearing House applications, subject to available resources at the time.

You should number each page of any attached documentation (with the first page being "page 9", the second being "page 10" and so on) and you and the person before whom you make the declaration should both sign the bottom of each page of this application and attached supporting documentation.

After examination of your application the Pro Bono Clearing House may ask you to provide further information before making a decision on the application.

(Please ensure you complete the Declaration on the following page)

8. Quality Assurance Feedback

- Please tick the box if you are happy for the Pro Bono Clearing House to contact you to receive feedback on the operation of the Clearing House. This will enable us to improve the service where necessary.

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Acknowledgement and Authorisation by Applicant

I acknowledge that:

1. The Pro Bono Clearing House does not grant assistance to applicants but merely acts as an intermediary between the public and the legal profession;
2. While it is the intention of the Pro Bono Clearing House that the lawyer to whom I am referred conduct my matter on a pro bono basis, it is my responsibility to negotiate the precise terms (including any terms requiring payment by me for disbursements or other costs) upon which I engage any lawyer introduced to me by the Pro Bono Clearing House;
3. I shall have no right of action against the Pro Bono Clearing House or the Law Society Northern Territory in any event arising from this application or its referral by the Pro Bono Clearing House.
4. While the Clearing House possesses the information in, or attached to, my Clearing House application, the Clearing House could be compelled to present some or all of that information to a court for use in legal proceedings against me or another person.

I hereby AUTHORISE the Pro Bono Clearing House to provide any information set out in this application (including, any document provided to it with respect to my application) to:

1. **Any person volunteering to assist the Pro Bono Clearing House to assess my application for assistance; and**
2. **Any lawyer that the Pro Bono Clearing House considers may agree to act for me, to enable that lawyer to decide whether they will act for me.**

Statutory Declaration by Applicant

I know that it is an offence to make a false statement in or in connection with this application and that if I do I will be liable to prosecution.

I _____ (full name) solemnly and sincerely declare that all the facts given in this application and supporting documentation are true and correct. I make this solemn declaration by virtue of the *Oaths, Affidavits and Declarations Act* (NT), and subject to the penalties provided by that Act for the making of false statements in statutory declaration, conscientiously believing the statements contained in this declaration to be true in every particular.

Applicant's signature

Declared at _____ this _____ day of _____ 20 _____

Before me _____
Signature of Person Before Whom Declaration Made

Title or Position of Person Before Whom Declaration Made