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**Claim for fee payable**

**Abhaile Solicitors Panel**

|  |  |  |
| --- | --- | --- |
| Solicitor |  |  |
| Client Name |  |  |
| Case number |  |  |  |  |
| Address of PPR **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Scheme number **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**The case number is the Voucher ID if providing services under the Solicitor Consultation Service or the Case Reference if providing Legal Aid. Leave blank if a Duty Solicitor claim. |
|  |

|  |  |
| --- | --- |
| **Fees for services Abhaile Solicitors Panel**  | **Fee claimed** |
| **SOLICITOR CONSULTATION SERVICE****Fee per consultation** (including all follow up work and furnishing client file to duty solicitor where applicable)Second Consultation (prior authority required)  |  |
| **DUTY SOLICITOR SERVICE**Half day fee 🞏 Full day fee 🞏 **I have attached the Duty Solicitor Service Client Details Form and I confirm my hours of attendance at court were from to** **on (insert date)** |  |
| **PIA REVIEW LEGAL AID SERVICE****Case fee (solicitor)**:- to cover all work carried out by him or her in regard to the case to include as appropriate, consultations, preparatory work, and/or court appearances incidental to the full hearing. **Circuit Court** **🞏 High Court** 🞏  |  |

**DETAILS OF OUTCOME - Solicitor Consultation Service**

Advice given on:

|  |  |  |  |
| --- | --- | --- | --- |
| Alternative repayment arrangement |  | Attending at court |  |
| Bankruptcy |  | Contract/ title issues |  |
| Correspondence from lender |  | Defences to proceedings |  |
| Mortgage to rent scheme |  | Options available to client |  |
| Personal insolvency |  | Repossession – the legal process |  |
| Resolution of mortgage arrears where borrowers are separated |  | Restructuring |  |
| Sale |  | Voluntary surrender |  |

**PIA Review Legal Aid Service**

|  |  |  |  |
| --- | --- | --- | --- |
| Order under s115A(9) granted |  | Order under s115A(9) refused |  |
| Case went to full hearing |  |  Date of full hearing |  |
| **Was an order made as to costs?** |
| In favour of Applicant or Debtor |  | In favour of Creditors(s) |  |
| No order as to costs |  | Other |  |
| **Was a written judgement handed down?** |
| Yes (provide neutral citation if available)  |  | No |  |

**I certify that I have provided the legal services as set out and I accordingly seek payment of the appropriate fee in accordance with the terms and conditions for the provision of legal services under the Terms and Conditions of the Abhaile Solicitors Panel.**

|  |  |  |
| --- | --- | --- |
| Liable for VAT : YES/NO | VAT No. if applicable  |  |
|  |  |  |
| Signature: | Solicitor | Date |  |

**NB** a complete claim form must be accompanied by a copy of the signed voucher, Client Details Form, or legal aid certificate. Please send to: Legal Services, Legal Aid Board, Quay St., Cahirciveen, Co. Kerry V23 RD36, DX 166004 CAHIRCIVEEN

**Office use Name Date**

|  |  |  |
| --- | --- | --- |
| Received by |  |  |
| Checked by |  |  |
| Authorised by |  |  |