



LAB REF NO. [ ]

SECTION 1: Declaration

A. Personal details (all fields to be completed by person detained in BLOCK CAPITALS)

Table with personal details: Name (Joe Bloggs), PPSN (123456A), Permanent address (1 Main Street, Town, County), Date of birth (01/01/1971), Tel. no. (086 123456)

B. Date of detention 01/09/2014 Garda Station County

State the legislation under which the detention occurred: (Tick the appropriate box)

Table with 2 columns: Legislation (Section 30, 4, 2, 50) and checkbox (checked for Section 4)

C. Statement of Means (To be completed by the person detained.)

- (i) Please state if you are currently in employment: Yes [checked] No
(ii) Please state your gross annual income from all employment: € 14,000
(iii) Please state if you are currently in receipt of a Social Welfare payment: Yes No
(iv) If yes, indicate the type of benefit(s) received:

D. Declaration (Applicant should read/understand points (i)-(v) carefully before signing this Declaration)

- (i) I hereby apply for legal advice under the Garda Station Legal Advice Revised Scheme. I declare that my total gross income does not exceed €20,316.
(ii) I understand that should I not satisfy the above mentioned criteria, I will be personally responsible for the costs associated with the provision of legal services in this instance.
(iii) I hereby give my consent to the Legal Aid Board to seek any such report as they consider necessary to confirm the accuracy of the information submitted under this application.
(iv) I understand that it is the policy of the Legal Aid Board to seek reimbursement of the cost of any legal advice provided to a person who makes a false declaration under this application.
(v) I hereby declare that to the best of my knowledge and belief the information provided in respect of this application is accurate and complete. I have only completed one application in respect of this detention.

Signed Joe Bloggs Date 01/09/2014

NB. Incomplete forms will be returned to the claimant. Fully completed and certified forms should be forwarded to: LEGAL AID BOARD, GARDA STATION LEGAL ADVICE REVISED SCHEME, CRIMINAL LEGAL AID SECTION, 47 UPPER MOUNT STREET, DUBLIN 2 (DX 139 Dublin).

## SECTION 2: Details of detention, consultations and attendances

A. To be completed by the solicitor claiming fees. Garda certification (signature and station stamp) is required to confirm that the consultations and / or attendances for Garda / Detainee interview occurred as outlined below for this detention. Please use the 3 consultation boxes in the top row to specify the start and end times of *any consultations claimed*, noting the limits on consultations payable as outlined in the Guidance Document. Please tick whether it was a phone or in-station consultation. Please state clearly the start and finish time of each complete attendance involving an interview.

Solicitor Name (PLEASE PRINT)		Solicitor Name (PLEASE PRINT)		Solicitor Name (PLEASE PRINT)	
Date	Garda signature and stamp	Date / /	Garda signature and stamp	Date / /	Garda signature and stamp
Start time	Consultation 1	Start time	Consultation 2	Start time	Consultation 3
End time	PHONE <input type="checkbox"/> IN-STATION <input type="checkbox"/>	End time	PHONE <input type="checkbox"/> IN-STATION <input type="checkbox"/>	End time	PHONE <input type="checkbox"/> IN-STATION <input type="checkbox"/>
Solicitor Name (PLEASE PRINT) JOHN SMITH		Solicitor Name (PLEASE PRINT)		Solicitor Name (PLEASE PRINT)	
Date 01/09/14	Garda signature and stamp Garda John Moran	Date / /	Garda signature and stamp	Date / /	Garda signature and stamp
Start time 07:45 am	Attendance for Garda Interview 1	Start time	Attendance for Garda Interview 2	Start time	Attendance for Garda Interview 3
End time 09:45 am		End time		End time	
Solicitor Name (PLEASE PRINT)		Solicitor Name (PLEASE PRINT)		Solicitor Name (PLEASE PRINT)	
Date / /	Garda signature and stamp	Date / /	Garda signature and stamp	Date / /	Garda signature and stamp
Start time	Attendance for Garda Interview 4	Start time	Attendance for Garda Interview 5		Extension Hearing
End time		End time			

NB If, within the provisions of the Scheme (see Garda Station Legal Advice Revised Scheme Guidance Document for details at [www.legalaidboard.ie](http://www.legalaidboard.ie)), it is necessary to claim more than 5 attendances / 3 consultations, a second form may be used. **Both forms MUST be returned together as a complete claim.**

Travelling expenses – total kilometres to and from Garda Station: \_\_\_\_\_ n/a \_\_\_\_\_

Were other legally aided detainees visited by the attending solicitor during the above detention? Yes \_\_\_ No  ( please tick)

### B. Declaration and details of solicitor and firm

I declare that the particulars given on this form are correct and that it is the only claim being made for legal advice provided in respect of the above detainee's detention. I also declare that no payment has been made by, or on behalf of, the detainee for such advice and no agreement has or will be entered into by me with or on behalf of the detainee.

Name and address of firm for payment (payee): Smith & Jones Solicitors, Street, Town, County.

Head of firm's signature: \_\_\_\_\_

VAT no. \_\_\_\_\_ Tax ID/PPSN (if not registered for VAT) \_\_\_\_\_

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AUTHORISATION		CATEGORY CLAIMED	FEE
Signature		Phone Consultation	
Block Capitals		Consultation (in-station) 8am – 8pm	
Date		Consultation (in-station) 8pm – 8am / weekend / BH	
I.D.		Attendance Hours 8am – 8pm	
Total Fee (excl. VAT & w/tax )	€	Attendance Hours 8pm – 8am / weekend / BH	
		Extension Hearing	
		Kilometres	