## WESTERN AUSTRALIA

Form 4

Civil Judgments Enforcement Regulations 2005 (Regulation 107D(1))

## **APPLICATION TO REDUCE FEE**

COURT
LOCATION:
Court ref number:

In the Supreme Court / District Court / Magistrates C	Court No of 2								
Applicant:									
Fee type for which request is made:									
Application or request under the <i>Civil</i> Judgments Enforcement Act 2004	□ Registering a judgment in a court under the Service and Execution of Process Act 1992 (Commonwealth) section 105(1)								
Concession Card Holder:	Pension								
$\Box$ Yes $\Box$ No	Concession								
	Health Care Card No:								
Grant of Legal Aid under a legal aid scheme or service:									
□ Yes □ No									
	Full Name:								
	Please indicate your party type:								
Applicant details:	Individual Entity								
	Address:								
	Date of Birth:								
If you are applying for a fee reduction because of financial hardship or in the interests of justice, please give supporting reasons for your request (attach a separate page if required). If the reasons include financial hardship you must complete the information on the following pages.									
I certify that the above information and disclosure	s in this form are true and correct.								
Applicant's Signature	Dated:								
*Note: A person who makes a statement or representation in this application that the person knows or has reason to believe is false or misleading in a material particular commits an offence under the Civil Judgments Enforcement Regulations 2005 regulation 101(1).									
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FINANCIAL DETAILS: APPLICANT WHO IS AN INDIVIDUAL									
If the reasons for application include financial hardship, the following sections of the form must be completed by the applicant if the applicant is an individual.									
Occupation:									
Employer:									
Employer's Address:									
Marital Status:	e	married 🗆 partn	er						
		separated husband / partner / de fact	0						
Dependants: (number of) dependant children									
INCOME AND FINANCIAL ASSETS DETAILS									
Income / financial assets (net)	Self	Partner	Total						
Wage / salary / benefit	\$	\$	\$						
Money in financial institution	\$	\$	\$						
Cash	\$	\$	\$						
Income from investments	\$	\$	\$						
Other income	\$	\$	\$						
Money loaned and to be repaid	\$	\$	\$						
Total	\$	\$	\$						
EXPENDITURE DETAILS									
Expenditure	Self	Partner	Total						
Rent / Board	\$	\$	\$						
Mortgage payment	\$	\$	\$						
Maintenance for dependants	\$	\$	\$						
Food	\$	\$	\$						
Utilities (gas / electricity)	\$	\$	\$						
Telephone	\$	\$	\$						
Water	\$	\$	\$						
Rates and taxes	\$	\$	\$						
Court orders	\$	\$	\$						
Credit cards/s	\$	\$	\$						
Other debts (provide details)	\$	\$	\$						
Total	\$	\$	\$						
TOTAL INCOME	\$	TOTAL EXPENDITURE	\$						

ASSETS						VALUE							
House or other property (provide addresses)							\$						
Motor Vehicles (car, utility, mot truck etc.)			1	Year Mak Mod Regi	ıke:						\$		
			2	Year Mak Moc Regi	ır: ke:						\$		
Other assets (provide details)								\$					
TOTAL ASSE	ΓV	ALUE	E							\$			
HOME CONTENTS (please complete appropriate box where applicable)													
Television	DVD player			Computers Other device			ctronic Dishwasher				Microwave		
\$	\$_			_	\$		\$		\$			\$	
Furniture	1	Collect			oins, Other collectables Other as		assets			terest in business company			
\$\$				\$\$					. \$				
LIABILITIES								T	OTAL				
Mortgage to:									\$				
Other to:									\$				
Time to Pay Order:						\$							
TOTAL LIABILITIES							\$_						
<b>FINANCIAL DETAIL: APPLICANT WHO IS NOT AN INDIVIDUAL</b> If the reasons for application include financial hardship, the following sections of the form must be completed by the applicant if the applicant is an entity.													
Income								\$_					
Assets	Assets								\$_				
Liabilities											\$_		
TOTAL							\$_						