

**APPLICATION FOR LEGAL REPRESENTATION AT PUBLIC
EXPENSE**

If you wish to apply for public funding for legal representation in the Inquiry, you should complete this form.

When completing this form, you should look at the Inquiry Procedure Direction No 3.1 – Applications for legal representation at public expense and at the Notes for Applicants at the end of this form.

Please refer to the procedures section of the Penrose Inquiry website to access these documents. A hard copy can be obtained from the Secretary to the Inquiry upon request.

Please return completed form

by email to:

info@penroseinquiry.org.uk ;

or

by post to:

**Maria McCann
Secretary to the Inquiry
The Penrose Inquiry
44 Drumsheugh Gardens
Edinburgh
EH3 7SW**

1. YOUR DETAILS

Your Full Name :

Your Postal Address (including postcode) :

Your telephone number Daytime :

Evening :

E-mail (if available) :

2. THE WORK TO BE FUNDED AT PUBLIC EXPENSE

2.1 Please specify the nature and scope of the work to be done by your legal representative for which you seek public funding.

In responding to this question you should consider paragraph 11 of the Inquiry Procedure Direction No 3.1 – Applications for legal representation at public expense.

2.2 Please say why you consider it to be in the public interest that your legal representation should be publicly funded.

2.3 Please say whether you wish to instruct your legal representative:

- for a single “one off” matter (give details of the matter);
- for the duration of the inquiry; or
- for part of the Inquiry (specify which part or parts)

2.4 If you wish to instruct your legal representative for a single “one off” matter, please give an estimate for the total number of hours of work expected on the part of your legal representative and any members of the legal team.

3. DETAILS OF THE LEGAL TEAM

3.1 Your Legal Representative

Full Name :

Firm Name :

Business Address
(including postcode) :

Business telephone number :

Mobile number :

Email address :

Nature of work to be
undertaken :

Proposed hourly rate :

Estimated number of hours to
be worked per week (if
known) :

3.2 Bank Details of your Legal Representative

Name of Account Holder :

Name of Bank :

Address of Bank
(including postcode) :

Account number :

Sort Code :

3.3 Please give the following details for each additional member of the legal team, please include counsel, solicitor advocates, assistant solicitors or paralegals if required:

Member of Legal Team (2)

Full name :

Position (QC, advocate, solicitor) :

Nature of work to be undertaken :

Proposed hourly rate :

Estimated number of hours to be worked per week (if known) :

Member of Legal Team (3)

Full name :

Position (QC, advocate, solicitor, paralegal) :

Nature of work to be undertaken :

Proposed hourly rate :

Estimated number of hours to be worked per week (if known) :

Member of Legal Team (4)

Full name :

Position (QC, advocate, solicitor, paralegal) :

Nature of work to be undertaken :

Proposed hourly rate :

Estimated number of hours to be worked per week (if known) :

Please use a separate sheet if you wish to provide details of more than 4 members of your legal team.

3.4 Please give details of any other likely expenses relating to your legal representation.

3.5. If the instruction of one or more experts is proposed please give details (so far as known):

Full Name and Address	Speciality or area of expertise	Purpose for which the expert is to be instructed	Hourly rate and estimate of total cost

4. FINANCIAL RESOURCES

4.1. Is your gross household income £30,000 per year (£2,500 per month) or less? Please circle either Yes or No in the boxes below. Please see Notes for Applicants which provide guidance in relation to the definition of gross household income.

<p style="text-align: center;">£30,000 or less? YES</p>

<p style="text-align: center;">£30,000 or less? NO</p>

If your gross household income is £30,000 per year (£2,500 per month) or less and you have answered YES to the question above then there is no need for you to complete the remainder of Part 4 (Financial Resources) of the form. Please go to Part 5 (Other Funding Sources and Further Information) on page 10 and complete the remainder of the form.

If your gross household income is more than £30,000 per year (£2,500 per month) and you have answered NO to the question above then please complete the following questions about your financial resources.

4.2. Income – Please provide details to confirm the normal amount of your gross household income per year. Please continue on a separate sheet if necessary.

Source of income	Amount
	<div style="border: 1px solid black; padding: 5px; display: inline-block;">Total Amount £</div>

4.3. Expenditure – Please provide details of your normal monthly household expenditure in relation to matters such as mortgage, utility bills, food and other household expenses.

Details	Amount
	<div style="border: 1px solid black; padding: 5px; display: inline-block;">Total Amount £</div>

4.4 Capital Assets – Please provide details of any savings and investments held by you or other members of your household

Details	Amount
	<div data-bbox="1007 814 1385 924" style="border: 1px solid black; padding: 5px; text-align: center;">Total Amount £</div>

4.5 Capital Liabilities – Please give details of any debts or liabilities owed by you or other members of your household

Details	Amount
	<div data-bbox="1007 1645 1385 1756" style="border: 1px solid black; padding: 5px; text-align: center;">Total Amount £</div>

5. OTHER FUNDING SOURCES AND FURTHER INFORMATION

5.1. Other Funding Sources – Please give details of any other resources available to you in relation to the funding of legal representation before the Inquiry. If no such resources are available to you please write “None”.

5.2. Other Information– Please give any other relevant information you wish to have taken into account

6. DECLARATION

I certify that I have no other means of paying for my legal representation. I certify that the information given in this application form is, to the best of my knowledge and belief, true and correct.

Signature:

Date:

NOTES FOR APPLICANTS

Financial Resources

Gross household income per year

1. This is the total income from all sources that you **and your partner** expect to receive in the 12 months following the date your application form is received.

2. "Partner" is someone you normally live with as a couple whether you are:

- married or not;
- of the same or different sex.

3. In calculating the amount of gross household income per year applicants should not include any payments received from:

- the Macfarlane Trust;
- the Macfarlane (Special Payments) Trust;
- the Macfarlane (Special Payments) (No. 2) Trust;
- the Eileen Trust; or
- the Skipton Fund;

or income from the following benefits:

- income support;
- an income-based jobseeker's allowance;
- a back to work bonus payable under the Jobseekers Act 1995;
- any payment made under the Community Care (Direct Payments) Act 1996 or under section 12B of the Social Work (Scotland) Act 1968;
- state pension credit;
- an income-related employment and support allowance;
- attendance allowance;
- disability living allowance or constant attendance allowance;
- any sums payable to a person as holder of the Victoria Cross or the George Cross; or
- any payment made out of the social fund.

Expenditure

4. Applicants should list payments they make regularly each month. This may include such things as:

- Mortgage/rent
- Insurance and Life Assurance
- Pension contributions (other than contributions paid to an employer's pension scheme by deduction from pay)
- Electricity/gas/other fuel
- Food
- Council tax
- Childcare
- Money paid out in connection with work (e.g. travel costs between home and work; trade union dues; subscriptions to a professional body)
- Maintenance payments
- Parental contribution for a dependent in full time education
- Loan/credit card repayments

Capital assets

5. This may include such things as:

- Savings accounts
- Shares
- Bonds
- PEPs/ISAs
- Life assurance or endowment policies unconnected with a mortgage
- Financial interest in any property, land or timeshare other than your main residence.

Declaration

6. Applicants are required to declare that they have no other means of paying for their legal representation. Other means might include:

- Funding from a professional association or trade union
- Funding from an insurance policy providing legal expenses insurance or professional indemnity insurance
- Funding from an employer in terms of a contract of employment.

7. Your signature will be treated as confirmation that all the information contained in your application form is correct, to the best of your knowledge.

8. The deliberate submission of a false claim is an offence.