



Application Form for Assistance New South Wales Crime Commission

Title (Miss, Mrs, Mr etc)	
Given Name/s	
Surname	
Previous Name/s	
Date of Birth	
Home address	
Suburb & Postcode	
Postal address (if different from the above)	
Suburb & Postcode	
Home telephone number	
Business telephone number	
Mobile telephone number	
Email address	
Do you require an Interpreter	<input type="checkbox"/> Yes <input type="checkbox"/> No
If so, which language?	
Occupation	
Employer	

Have you received any of the following from the NSW Crime Commission?

**A Production Notice for Documents or Things?
(Section 29 Notice)
If so, please specify the date for compliance**

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**A Summons to Appear Before the NSW Crime Commission.
If so, please specify the date for compliance**

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Will compliance with the Notice or Summons cause substantial hardship to you if refused? If so, please provide details.

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Please briefly state the circumstances of the case which are of such special nature that the application should be granted.

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Do you present have your own Solicitor and / or Barrister? If so, please specify their name and address.

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CURRENT INCOME FROM ALL SOURCES (BEFORE TAX)			
Give the weekly amount averaged over the last twelve months. This will include salary, commissions, dividends, interest, rents received, pensions, annuities, maintenance, drawings from partnership, company or trust and any other income.	Source	Amount	Total
Any other monies received in the last twelve months		\$	
Total income			\$
DEPENDENTS			
Number of Dependents			
EXPENSES (AVERAGE WEEKLY)			
Income tax			
Superannuation			
Food and household			
Accommodation (board, rent, mortgage, rates)			
Interest payments			
Motor Vehicle			
Utilities (gas, telephone, electricity)			
Any other regular expenses			
Total expenses		\$	
Net income.			\$
ASSETS			
Real Estate (please provide address)			
Credit in banks / financial institutions (please provide name of bank etc.)			
Motor vehicles (please provide description)			
Shares			
Interest in business partnership			
Furniture (household effects)			
Personal property (artwork, jewellery, boats etc.)			
All other property			
Total Assets			\$

Information contained on this form may be forwarded to the Secretary of the Department of Communities and Justice and the Attorney General for the determination of your application.



LIABILITIES			
	Source	Amount	Total
Mortgages (please provide security address)			
Overdraft (name of bank etc.)			
Credit Card (please provide name of lender)			
Loans (please provide name of lender)			
Hire purchases / Leases (please provide name of lender)			
Any other debt outstanding (please provide details)			
Total liabilities		\$	
NET ASSETS			\$

Signature:	
Date:	