



FAMILY LAW
COURTS

Application – Reduction of

Payment of court fees – general

Family Law Regulation 11A,11C
Federal Magistrates Regulations 2000, Regulation 8D

Give Details

File Number	
File name	
Date filed	

Cross boxes where applicable

Notice to applicant

Use this form if:

- you are the primary cardholder of a Health Care Card, Health Benefit Card, Pensioner Concession Card, Commonwealth Seniors Health Card or any other card issued by Centrelink or the Department of Veterans' Affairs that entitles you to Commonwealth health concessions (does not include a dependant of the primary cardholder), or
- you are receiving Legal Aid, Youth allowance or Austudy payment or Abstudy, or
- you have received a 'Notice of Reduction' from an approved Community Legal Centre, or
- you are a child under 18, or
- you are an inmate of a prison or otherwise legally detained in a public institution.
- your circumstances have changed since you paid your court fees and you now qualify under one of the above categories
(Note you may be eligible for a refund of fee previously paid)

When returning your completed application form to the registry you will need to attach photocopies of documentary evidence of any of the above (such as your Health Care Card or Legal Aid letter) to support your claim. Photocopy both sides of the card or other document.

If you do not qualify for any of the above, you may be able to apply for a fee to be reduced on the basis of financial hardship. Ask registry staff for the appropriate form and guidelines. **A fee of \$60.00 is payable at time of lodgment.** If your application for a reduced fee is unsuccessful, you will need to pay the remaining amount of the fee before your forms will be accepted.

Please note: It is your responsibility to inform the registry should your circumstances change.

Please note: The regulations provide that the filing fee for Consent Orders cannot be reduced.

Details

1 Name and address	family name (surname)	given names
	postcode	telephone
2 Fee for which reduction is sought	Family Court <input type="checkbox"/> Federal Magistrates Court <input type="checkbox"/> Form: Application (including divorce) <input type="checkbox"/> Response <input type="checkbox"/> Setting-down Fee <input type="checkbox"/> Hearing Fee <input type="checkbox"/> Other <input type="checkbox"/> Appeal: to Full Court <input type="checkbox"/> from court of summary jurisdiction <input type="checkbox"/>	
3 Reason for seeking reduction	I currently receive the following means-tested pension or other benefit: <input type="checkbox"/> Health Care Card <input type="checkbox"/> Pensioner Concession Card <input type="checkbox"/> Commonwealth Seniors Health Card <input type="checkbox"/> Any other card issued by the Centrelink or the Department of Veterans' Affairs that certifies entitlement to Commonwealth health concessions <input type="checkbox"/> Youth allowance or Austudy payment <input type="checkbox"/> Abstudy benefits Or <input type="checkbox"/> I am in receipt of Legal Aid <input type="checkbox"/> I have received a 'Notice of Reduction' from an approved Community Legal Centre <input type="checkbox"/> I am a child under 18 years <input type="checkbox"/> I am an inmate of a prison or otherwise lawfully detained in a public institution	

Signature

<input type="checkbox"/> Person in 1 or <input type="checkbox"/> lawyer who prepared this application for person in 1 (<i>print lawyers name</i>)
--

Name of lawyer who prepared this application for person in 1
--

Court use only

<input type="checkbox"/> Copy of relevant documents attached	<input type="checkbox"/> Reduction granted	<input type="checkbox"/> Reduction refused	<input type="checkbox"/> Reduced Fee	<input type="checkbox"/> Legal Aid
--	--	--	--------------------------------------	------------------------------------

Signature of officer	Name of officer	Date / /
----------------------	-----------------	----------

