Translation from Norwegian

Application form for free legal aid (Self declaration)

Jews CH-

Please enter all information as accurately and completely as possible

	In immigration cases: DUF no. (Asylum seekers must state all their DUF nos.) :							
	Full name		Date of birth		Pers. ID no. /			
Personal							Business reg. no.	
information (applicant)	Postal address Post code			Town / city		Home tel. no.		
	Occupation / job	Employer				Work te	el. no.	
	Marital Married Civi	il Divorce	ed /	Cohabitin	g W	idowed	Single	
		tnership separa		_		_		
	Neme				Tal			
	Name	Address			Tel. r	10.		
Lawyer /								
legal	Has another lawyer or legal services provider previously worked on this case?							
services	□ Yes □ No							
provider	Has free legal aid previously been provided in this case?							
	The case concerns: Free	legal advice	Free	e representatio		No		
		iegui duvice		representatio				
	Do you have legal aid insurance** that fully or partly covers the need for assistance in this							
	case?				_			
Legal aid insurance	Yes	no contonte or cor inc	uranco	that provides an		No	cos in privato	
insurance	** Most people have home, home contents or car insurance that provides cover for legal expenses in private disputes. It is a condition that this has been checked before applying for free legal aid.							
	A copy of the tax assessment for the applicant and the applicant's spouse / partner /							
	cohabitant must be enclosed.							
Last tax assessment	If the applicant's current financial situation is significantly different from the information provided here, this must be documented.							
(for minors:	provided here, this must t	e documented.						
of their parents)	The applicant Tax a	ssessment for	Gro	ss income (NO	К)	Net we	alth (NOK)	
	Spouse / partner Tax a / cohabitant	ssessment for	Gro	ss income (NO	К)	Net we	alth (NOK)	
			Owi	า		Spouse cohabit	/ partner / ant	
Current financial	Gross earned income per							
status	Social security / pension per month							
	Other taxable income per month					NITTR		

True translation certified – Government Authorised Translator 9 October 2018

Translation from Norwegian

Net wealth	
To the best of my knowledge the information provided here is correct. I am familiar with the income and capital limits and rules on the client's contribution. I consent to the necessary obtaining of further information about my financial situation from the tax authorities, my employer, and the National Insurance Service (as applicable).	I have informed the applicant about the income limits and rules on reimbursement. The information is complete and correct.
Date Applicant's signature	Date Lawyer / legal services provider's signature

GA-6305B (Approved Jan 2022) Electronic version



