

**CRIMINAL JUSTICE (LEGAL AID) ACT, 1962
CRIMINAL JUSTICE (LEGAL AID) REGULATIONS, 1965 TO 2007**

**CLAIM FOR FEES (SOLICITOR ONLY, DISTRICT COURT OR AN APPEAL TO THE CIRCUIT COURT) AND
SOLICITOR'S TRAVELLING AND SUBSISTENCE EXPENSES.**

PART 1

1. Name(s) and address(es) of person(s) ***(please use block capitals)*** in respect of whom legal aid certificate(s) was/were granted.

Surname	Forename	Address	L.A. Cert. No.

2. Name and location of Court which granted legal aid cert(s):

Date granted: ____/____/20____

District Court Case Number:

3. State in general terms, the charge(s) in
respect of which legal aid was assigned.

4. Amounts claimed:

Court	Date	Solicitor's Fee	Court	Date	Solicitor's Fee

SOLICITORS TRAVELLING AND SUBSISTENCE EXPENSES

Date	Depart Time	Return Time	Journey(s)		Mode (Car etc.)	Distance in km.	Travel €	Sub. €
			(From - To)	(Reason)				

I declare that:

Total claimed:

€

- (i) the particulars given by me in this form are correct,
- (ii) that I have not received, nor will I accept any payment towards the cost of this case from, or on behalf of, the defendant(s),
- (iii) that I have not made any claim for payment to which I am not entitled,
- (iv) that I am liable for V.A.T.,
- (v) that in a case to which Regulation 7(4) applies, the Court certified for the granting of more than one certificate, and
- (vi) I further declare that I was on the Criminal Legal Aid panel when assigned to this case.**

Signed: (Solicitor assigned) Payee No.:

Name in capitals: Date: ____/____/20____

Name/Address of Solicitor's Office:

Part 2

(to be completed by the District Court Clerk, or Court Registrar, as the case may be, of the Court in which the case was heard)

I certify that the information given in reply at Nos. 1 – 3 of Part 1 (over) of this form is correct, that the solicitor who has signed Part 1 of this form was assigned pursuant to the certificate(s) for free legal aid to which this form relates and that the said solicitor attended the Court sitting(s) on each of the dates for which fees are claimed at No. 4 of Part 1 of this form.

I certify that no application was made, in the opinion of the Court, for the solicitor's convenience.

I further certify that the following is the reason(s) given by the Court for deeming that more than one certificate has been granted (Regulation 7(4)):

.....
.....
.....

Signed:Office held: Date: ___/___/20__.

Part 3

(for use in the Department of Justice and Equality)

Name

Amount €

.....
.....
.....

Approved for payment in the sum of:

€

Signature of approving officer: Date: ___/___/20__.

Entered by: Date: ___/___/20__.

Checked by: Date: ___/___/20__.

NOTES

Where one Court grants the certificate(s) for free legal aid in respect of which a claim is made on this form and the case(s) is/are heard in a different Court, the solicitor concerned should lodge the claim with the Officer of the Court which heard the case(s).

A claim form should be completed in respect of each certificate for free legal aid granted, except:

- Where two or more certificates are granted to a person and the cases in relation to which they are granted are heard together or in immediate succession and, in the absence of a direction otherwise by the Court, one certificate is deemed, in accordance with the provisions of Regulation 7(4), to have been granted, one claim only should be completed;
- Where certificates for free legal aid have been granted on behalf of two or more persons whose cases have been heard together, one claim form only should be completed in respect of such certificates.

This form, when completed, should be forwarded to:

The Accountant, Criminal Legal Aid Payments Section, Department of Justice and Equality, Financial Shared Services, Deerpark Road, Killarney, County Kerry.