

# WESTERN CAPE OFFICE

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**Reference No:**

## APPLICATION FOR PRO BONO LEGAL ASSISTANCE

### **1. PERSONAL PARTICULARS OF THE PRO BONO CLIENT:**

Title: (Mr; Mrs; Ms; Miss) \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Identity Number: \_\_\_\_\_ Gender (Male/Female): \_\_\_\_\_

Residential Address: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone Number: Home \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Marital Status: (Married; Single; Divorced; Widowed) \_\_\_\_\_

### **2.1. FINANCIAL INFORMATION OF THE PRO BONO CLIENT:** (complete what is applicable to you)

Employment Status: (Employed; Unemployed; Pensioner; Other) \_\_\_\_\_

Monthly Gross Salary: (Please provide us with the most recent payslip) \_\_\_\_\_

Pension Amount: (State/Private) \_\_\_\_\_

Other Income: (Please Specify) \_\_\_\_\_

Value of Fixed Property: (Please provide us with a Municipal Property Valuation) \_\_\_\_\_

(Please provide us with an affidavit of unemployment if you are not working)



What outcome do you desire?

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**4. CESSION OF COSTS:**

The Applicant acknowledges that, in the event that this application for pro bono services is successful that in any legal proceedings or in any dispute in respect of which legal services are rendered on a pro bono basis to the Applicant by a legal practitioner, and costs become payable to the Applicant in terms of a judgment of the court or a settlement, or otherwise, such Applicant, shall by signing this application, be deemed to have ceded his or her rights to the costs to the Legal Practice Council : Western Cape Office.

**5. DECLARATION BY THE APPLICANT:**

I (print full name and surname) \_\_\_\_\_ do hereby confirm that the information contained in this form which was provided by me is within my personal knowledge, and is true and correct. I understand that failure to give all the facts in this form or during consultation will result in my application being refused / cancelled on the basis of non-disclosure of important information and /or dishonesty.

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**CHECKLIST OF SUPPORTING DOCUMENTS TO BE SUBMITTED WITH THE COMPLETED APPLICATION FORM:**

1. Copy of Identity document
2. Recent Payslip /Proof of income (if you are employed);
3. Unemployment Affidavit ( if unemployed)
4. 3 months recent bank statements for all bank accounts
5. Municipal property valuation (if you are a homeowner)

**If you are married we require the following supporting documents for your spouse:**

1. Copy of Identity document
2. Recent Payslip/Proof of income (if s/he is employed);
3. Unemployment affidavit (if s/he is unemployed)
4. 3 months recent bank statements for all bank accounts