

# GAUTENG PROVINCIAL OFFICE

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## NATIONAL OFFICE

Temporary Address: Procforum Building | 123 Paul Kruger Street | PRETORIA  
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### **PRO BONO SCHEME APPLICATION FORM**

Dear Sir/ Madam,

Kindly complete the application form attached and send it back to us with the necessary **SUPPORTING DOCUMENTS** as listed on **page 8** of the form and any additional documents that you have to support your matter/case.

Kindly take note that there are certain criteria in order to qualify for Pro Bono.

Should your application for Pro Bono be declined we will provide reasons for the decision or we **MAY** refer you on the following basis:

**First Interview:** Where you get a 30 Minutes free consultation with an attorney, where after you may enter into a fee agreement with the attorney should u wish to continue with him/her.

Further note that it is **COMPULSORY** to sign the **DECLARATION** being the last page of the application form.

***NO INCOMPLETE APPLICATIONS WILL BE PROCESSED.***

The application will take 4-6 weeks to be processed unless it's an **URGENT** matter that has to be heard in **COURT** and has a court date provided.

For personal submissions:

1. Jhb High Court: Pritchard St & Kruis St, Johannesburg (MON-FRI from 9H00-12H00)

[ProbonoJHB@judiciary.org.za](mailto:ProbonoJHB@judiciary.org.za) (011) 335 0331

2. Pta High Court: Paul Kruger & Madiba St, Pretoria (MON-FRI from 9H00-12H00)

[ivyk@lpc.org.za](mailto:ivyk@lpc.org.za) (012)315 7408

## PRO BONO SCHEME APPLICATION FORM

Date: 

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### CLIENT PARTICULARS:

Surname:																								
Maiden name:																								
First names:																								
Identity number:														Gender	M	F	Age							
Place of birth							Nationality																	
Population group	African			Coloured			Indian			White			Asian		Other									
Residential address:													Code											
Tel no. (H):														Tel no.(W):										
Cell no:																								
E-mail																								
Marital status	Married (if you are married, please complete section 2)				Single				Divorced				Widowed											
Date of marriage (if applicable)	Y	Y	Y	Y	M	M	D	D																
Type of marriage (if applicable)	Civil		Customary			Religious			Other (specify)															
	In community of property						Out of community of property																	
							(with accrual system)			(without accrual system)														
Employment status	Employed			Unemployed			Pensioner			Other (specify):														

### IF YOU ARE EMPLOYED PROVIDE THE FOLLOWING INFORMATION:

Name of employer											Tel no.										
Employer address																					
												Code									

**IF YOU ARE A PENSIONER PROVIDE THE FOLLOWING INFORMATION:**

Type of pension	Private pension fund	State pension	Name of private pension fund	
Pension amount (per month)	R			

**SPOUSE'S PARTICULARS (complete if you are married)**

Surname																								
Maiden name																								
First names																								
Identity number														Gender	M	F	Age							
Place of birth							Nationality																	
Population group	African	Coloured	Indian	White	Asian	Other																		
Residential address																								
												Code												
Postal address																								
												Code												
Cell no.														Fax no.										
E-mail																								
Employment status	Employed	Unemployed	Pensioner	Other (specify):																				

**IF YOUR SPOUSE IS EMPLOYED PROVIDE THE FOLLOWING INFORMATION:**

Name of employer								Tel no.									
Employer address																	
												Code					

**IF YOUR SPOUSE IS A PENSIONER PROVIDE THE FOLLOWING INFORMATION:**

Type of pension	Private pension fund	State pension	Name of private pension fund	
Pension amount (per month)	R			





HAS THIS MATTER BEEN HEARD IN COURT?  YES /  NO

IF YES WHAT WAS THE OUTCOME?


WHEN ARE YOU REQUESTED TO APPEAR IN COURT AGAIN?

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**MEANS TEST/PROOF OF INCOME**

I hereby confirm that my total (gross) monthly household income is the following:

	APPLICANT	SPOUSE (if applicable)
Salary	R	R
Pension	R	R
Other income	R	R
Value of fixed property		

<b>TOTAL MONTHLY HOUSEHOLD INCOME</b>	R
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**CESSION OF COSTS**

The applicant acknowledge that any cost order which might be awarded in favour of him / her in respect of any action, application or any other legal proceedings which might be instituted or defended on his / her behalf arising from this *Pro Bono* instruction be ceded to the Legal Practice Council: Gauteng.

It is agreed that the cessionary does not warrant the success of the instituting or defending of any action, application or any other legal proceedings and the cessionary shall not be liable for any costs orders that may be awarded against the applicant.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

## DECLARATION

I, the undersigned

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With identity number

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hereby confirms as follows:

1. I am the pro bono applicant in this matter.
2. I acknowledge and understand that the pro bono service which is rendered by the attorney is done for free. It means that the attorney will not charge any legal fees for professional services rendered.
3. I acknowledge and understand that I will be held liable for the disbursements / legal expenses relating to the pro bono matter, if any.
4. I acknowledge and understand that the disbursements mentioned below is just a few of the possible legal expenses which I may be held liable for:
  - Sheriff's fees.
  - Tracing agents' fees.
  - Legal costs of the opponent (if a cost order is made in favour of the opponent).
  - Reserved costs.
  - Wasted Costs (if a cost order is made in favour of the opponent).
  - Security on request of the sheriff or court.
  - Advertisement costs.
  - Transcript costs.
  - Disbursements relating to the issuing of a certified copy of the title deed if the original are not available.
  - The costs for obtaining a rates clearance certificate.
  - The fees of office payable to the Registrar of Deeds in respect of transfer.
5. I confirm that I understand the contents of this declaration, that the contents are true and correct, and that I have no objection to make this declaration.
6. I acknowledge that pro bono services may be withdrawn at any stage, should I not adhere to the above, or if any of the information set out in the pro bono application form is false or incomplete and that I can be prosecuted for fraud.

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SIGNATURE

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DATE

**SUPPORTING DOCUMENTATION TO BE SUBMITTED WITH THIS APPLICATION FORM:**

1. Identity Document;
2. Proof of residence;
3. Marriage Certificate (if applicable);
4. Salary advice;
  - a. If unemployed – an affidavit stating that you are unemployed;
5. Bank statements for all accounts for the past 3 months.
6. Letter of Authority from the Masters' Office (if applicable).
7. Court documents / Summonses / Judgments / Transcripts (if applicable).
8. Title Deed of property in dispute (if applicable).
9. Birth Certificate(s) of minor children (if applicable).

➤ **Please note that if you are married, the following documents are needed in respect of your spouse:**

1. Salary advice;
  - a. If unemployed – an affidavit stating that your spouse is unemployed;
2. Bank statements for all accounts for the past 3 months.