

**WESTERN AUSTRALIA**

REG. 9A OF THE CHILDREN'S COURT (FEES) REGULATIONS 2005

**Application to Change Fee****Interests of Justice**

Approved Form 1C

**CHILDREN'S COURT****LOCATION:****Court Ref Number:**

This form is used to apply for a change to a fee payable in the Children's Court. You can apply to have a fee reduced, postpone the payment of a fee, or have a fee you have already paid fully or partially refunded.

<b>Applicant Details:</b>	<b>Full Name:</b>	
	Please indicate your relationship to the matter: <input type="checkbox"/> Applicant <input type="checkbox"/> Respondent <input type="checkbox"/> Other	
	Please indicate your party type: <input type="checkbox"/> Individual <input type="checkbox"/> Person other than an Individual	
	<b>Address:</b>	

**I am applying for the fee to be:**

Reduced       Refunded       Postponed until \_\_\_\_\_ (DD/MM/YYYY)

Full Fee Amount: \$ \_\_\_\_\_

**Fee type for which request is made:**

Application fee       Hearing fee       Transcription fee       Other (please describe below)

**Reason for Fee Concession**

Describe why the payment of the fee should be reduced, refunded or postpone in the interests of justice, for example the right or obligation affecting the community (further information may be attached if required).

**Declaration**

I declare that the information I have provided is true and correct. I understand it is an offence to provide false or misleading information to the Children's Court.

**Office Use Only**

Outcome \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_