



CONTINUING APPLICATION FOR GRANT OF FINANCIAL ASSISTANCE Native Title Respondent Funding Scheme

Use this form if you have previously been granted assistance in relation to this matter.

1. Matter number _____

2. Name and address of applicant (individual or organisation): _____

3. Applicant's solicitor's name: _____

4. Contact address: _____

5. Email: _____

6. Telephone: _____

7. Name of native title proceedings: _____

8. If you are not a group representative of multiple applicants, have your financial circumstances changed since your last application for financial assistance? Yes No

If yes, provide details and **ATTACH** supporting documentation: _____

9. What has happened in the proceedings during the past six months? (for example, level of activity allocated by the Court, nature of any orders made, outcome of any meetings, mediations, directions hearings etc): _____

10. What is anticipated to happen in the proceedings during the coming six months? (for example, date of next directions hearing, date and reason for anticipated meetings/mediations): _____

11. How does the anticipated workload in Question 10 compare to the work done in the past six months? (for example, do you expect an increase, decrease or similar workload?) _____

COST ESTIMATE

12. Based on your answer to question 10, estimate your anticipated legal costs in relation to the proceedings for the next six months? Please note this scheme of assistance is akin to legal aid and commercial rates for legal costs are not payable. You must provide a breakdown of anticipated professional fees, travel disbursements and general disbursements with reference to the Federal Court Rules scale of costs.

PLEASE ATTACH AN ITEMISED BUDGET TO YOUR APPLICATION.

DECLARATION

I, _____ (applicant/solicitor/agent) declare that the information provided in this application is true and correct to the best of my knowledge and belief. I agree:

- that the Department may obtain information about the application/proceedings (including a legal opinion) from other government or industry bodies or from the applicant's solicitor
- that the Department may disclose information in the application or information obtained from the applicant to another applicant or government or industry body for the purposes of deciding whether to authorise assistance, and
- to adhere to the general terms and conditions of the Native Title Respondent Funding Scheme if a grant of assistance is approved as a result of this application.

Signed: _____

Dated: _____

Please submit this application via email to finass@ag.gov.au. The Department does not require a hard copy. Please advise the Department on (02) 6141 4770 if you do not have access to email. Only complete applications will be accepted on processed. Your application will be deemed incomplete if:

- any of the above questions are not answered, or are only partially answered, or
- the required supporting documentation is not provided.