Tribunals Service
Gambling

Application for a fee exemption or remission (Individuals)

For the Tribunal's use only				Reference no.	
Evidence for automatic exemption?	Yes		No	Authorised by	
Remission granted?	Yes		No	Job title	
Fee applicable	£			Signature	
Amount exempted or remitted	£				
Amount to pay (or 'Nil')	£			Date	D D M M Y Y Y Y

1. About the appeal

1a) Name of appellant

1b) Name of respondent

1c) Appeal number (if issued)

1d) Type of appeal

1e) Are you applying for a refund of a fee already paid in this appeal? Yes ☐ No ☐

If so, on what date was the fee paid? D D M M Y Y Y Y

2. About the appellant

2a) Surname

2b) Forenames

2c) Title Miss ☐ Mr ☐ Mrs ☐ Ms ☐ Other

2d) Relationship Married ☐ Single ☐ Civil partnership ☐ Other

2e) Is the appellant or his/her partner receiving:

	Appellant	Appellant's partner
Income Support	Yes ☐ ☐ No	Yes ☐ ☐ No
Pension Credit guarantee credit	Yes ☐ ☐ No	Yes ☐ ☐ No
Working Tax Credit	Yes ☐ ☐ No	Yes ☐ ☐ No
With a 'disability element' or a 'severe disability element'	Yes ☐ ☐ No	Yes ☐ ☐ No
Child Tax Credit	Yes ☐ ☐ No	Yes ☐ ☐ No
2f) Income-based Job Seekers Allowance	Yes ☐ ☐ No	Yes ☐ ☐ No

3. Dependants

Dependants are people whom the appellant looks after financially. They may be children, relatives or other people.

Give the number of children aged:

Under 11 ☐ 11 to 15 ☐ 16 - 17 ☐ 18 ☐

Other dependants

Please give details about who they are and why the appellant looks after them.

4. Employment

Employed ☐ Self-employed ☐ Unemployed ☐ Pensioner ☐

What is the appellant's usual employment or self-employment?

How long has the appellant been unemployed?

5. Property

Sole owner ☐ Joint owner ☐ Rented ☐ Lodgings ☐

If the appellant lives in another type of property, please explain (e.g. living with parents).

Other

6. Savings

Give an amount for each type of savings.

Write "NIL" if there are no savings in a category.

Bank account (current)	£	Premium Bonds	£
Bank account (deposit)	£	Stocks and shares	£
Building Society account	£	National Savings investments	£
Building Society account	£	Other savings	£

Please give details of any "Other savings" amount shown

7. Income

Usual **take-home** pay	£	Child Benefit	£
Partner's usual take-home pay	£	Tax Credits	£
Income from others in the home	£		£
State pension(s)	£		£
Private or occupational pension(s)	£	**Total income**	£

Give the amount received **each month** for each category of income. If there is no income for a type shown, write "NIL". Add extra types of income as necessary. If you have a weekly income, multiply it by 4⅓. Add up the amounts and put the sum in the "**Total income**" box.

8. Expenses

Give the amount received **each month** for each category of income.

If there is no income for a type shown, write "NIL".

Add extra types of expense as necessary.

If you have a weekly expense, multiply it by 4⅓.

Add up the amounts and put the sum in the "Total expenses" box.

Rent or Mortgage	£	Child care	£
Council Tax	£	Travel expenses	£
Food and household	£	Court fines	£
Water charges	£	Outstanding debts	£
Electricity	£	Clothing	£
Gas, coal or oil	£		£
Telephone	£		£
TV rental and licence	£		£
Maintenance / Child Support	£	**Total expenses**	£

9. Declaration

I declare that the information that I have given is true to the best of my knowledge and belief.

I apply for exemption ☐ remission ☐ refund ☐ of a court fee and understand that

- I will be asked to provide documents as evidence to support my statements
- my appeal will not proceed if I do not provide the evidence
- my application will be refused if I have not disclosed any relevant facts in this form.

SIGNATURE

D D M M Y Y Y Y