

INFORMATION ON HOW TO RETAIN AN ATTORNEY

You are a party in a current family court proceeding. You may be entitled to be represented by an Attorney for all Family Court matters. If you are not able to afford counsel, but plan to request an assigned counsel to represent you in this proceeding, you are required to submit the attached application, along with the necessary documents, to the Livingston County Public Defender's Office as soon as possible in order for your attorney to appear with you at your first court appearance.

You may apply online at <https://www.livingstoncountyny.gov/FormCenter/Public-Defender-28/Public-Defender-Application-New-184>

OR

You may complete and submit the attached application to:

Livingston County Public Defender's Office

6 Court Street, Room 109

Geneseo NY 14454

Phone: (585) 243-7028

Office Hours: Weekdays, 8:00 AM to 4:00 PM

You must attach copies of the following documents to your application:

- 1.) Court papers, including your next court date.
- 2.) Proof of income, to include current paystubs, DSS award letter, SSI/SSD or unemployment statement.

**FAILURE TO SUBMIT THE NECESSARY DOCUMENTATION
IN A TIMELY MANNER WILL RESULT IN UNNECESSARY
DELAYS OR DENIAL OF AN ATTORNEY.**

Important Information About Your Court Appearance:

It is important to be on time for your scheduled appearance. Please arrive **15-30 minutes BEFORE** your scheduled appearance as delays can occur in the security screening to enter the building. **The building opens at 8:30a.m.** Please bring your Summons/Appearance Notice with you for reference purposes when checking in with court security.

Livingston County Application for Assigned Counsel

YOU MUST FILL OUT **EACH SECTION** OF THIS FORM. WE MUST HAVE ALL COURT DOCUMENTS AND YOUR ACCURATE INCOME INFORMATION. THIS FORM CAN ALSO BE FOUND ONLINE.

PART I

Personal Information

Full Name: _____	Who is in your household? Relationship, age: _____
Date of Birth: _____	_____
Social Security Number: _____	_____
Mailing Address: _____	_____
_____	_____
Phone Number: _____	Born in US?: Yes <input type="checkbox"/> No <input type="checkbox"/> _____
May we contact you by text? Yes <input type="checkbox"/> No <input type="checkbox"/>	If No, Where: _____
Email Address: _____	First Language: _____
May we contact you by Email? Yes <input type="checkbox"/> No <input type="checkbox"/>	Veteran?: Yes <input type="checkbox"/> No <input type="checkbox"/>

Case Information

<u>Criminal Court</u>	<u>Family Court</u>
Name of Court: _____	Type of Petition: _____
Arrest Date: _____	Next Court Date: _____
Arraignment Date: _____	Judge: _____
Next Court Date: _____	Other Parties Involved: _____
Brief Description of Charges: _____	_____
_____	_____
_____	_____
Co-Defendants/Involved Parties: _____	

Are you currently incarcerated? Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you currently receive public assistance? (DSS/SNAP/Section 8) Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you been found eligible for assigned counsel in this or another county within the past 6 months? Yes <input type="checkbox"/> No <input type="checkbox"/>

CONTINUE ON REVERSE

(If reverse is not completed, application will be denied)

PART II

Income

Are you currently working? Yes No If no, date last employed: _____

If yes, Employer: _____

Hourly Wage: \$_____ Hours per week: _____

What is your NET (take-home) pay per **month**? _____

Do you have any other sources of income? Yes No

If so, how much per month? \$_____ Type of other source of income: _____

Monthly Living Expenses

Rent/Mortgage: \$_____ Utilities: \$_____ Transportation/Auto Expenses: \$_____

Food: \$_____ Child Care: \$_____ Child Support: \$_____

Credit Card Payments: \$_____ Other monthly expenses (medical bills, student or personal loans, etc.): _____

Signature: _____ **Date:** _____

RETURN THIS FORM AND SUPPORTING DOCUMENTS TO:

Livingston County Public Defender
6 Court Street, Room 109
Geneseo, NY 14454
Phone: (585) 243-7028
Fax: (585) 243-7193
lcpd@co.livingston.ny.us

FOR PUBLIC DEFENDER USE ONLY:

Eligible: Yes No Reviewed by: _____

Conflict: _____

Notes: _____

