

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
<https://www.courts.nh.gov>

Court Name: _____
 Case Name: _____
 Case Number: _____
 (if known)

REQUEST FOR A LAWYER

Name: _____ Date of Hearing: _____

Address: _____

City, State, Zip Code: _____

Telephone: _____ Date of Birth: _____ Age: _____

Marital Status Single Married Divorced Separated Widowed

List dependents you personally support: (Include address if not same as yours. List relationship & age)

a. _____ c. _____
 b. _____ d. _____

1. AVAILABLE MONEY:

	YOURS	SPOUSE
a. Cash on Hand	\$ _____	\$ _____
b. Checking and savings accounts	\$ _____	\$ _____
c. Stock, Bonds, Trusts, CD's, Other	\$ _____	\$ _____
TOTAL:	\$ _____	\$ _____

2. INCOME (MONTHLY):

a. Salary/Wages – Take home pay (weekly _____ x 4.333=)	\$ _____	\$ _____
b. Alimony or Maintenance Received (weekly _____ x 4.333=)	\$ _____	\$ _____
c. Child Support Received (weekly _____ x 4.333=)	\$ _____	\$ _____
TOTAL:	\$ _____	\$ _____

3. EMPLOYMENT:

	YOURS	SPOUSE
a. Employer: _____	_____	_____
b. Address: _____	_____	_____
Check: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal

4. HOUSING COSTS (MONTHLY):

a. Rent or Mortgage	\$ _____
b. Utilities (Electricity, heat, etc)	\$ _____
TOTAL:	\$ _____

5. MONTHLY LOAN PAYMENTS:

(List only loans and regular payments not listed elsewhere. NOT for monthly living expenses.)

Name	Purpose	Still Owe	Monthly Payment
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
TOTAL:		\$ _____	\$ _____

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6. OTHER PAYMENTS - Alimony Paid, Child Support, Restitution, Child Care:

Name	Purpose	Still Owe	Monthly Payment
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
TOTAL:			\$ _____

7. PROPERTY:

a. Do you own a house or other real estate? Yes (if yes, list) No
 _____ Market Value \$ _____
 Who holds mortgage _____ Mortgage Owed \$ _____

b. Have you sold or transferred any real estate or personal property worth \$200 or more in the last 6 months? Yes (if yes, list) No

Property	To Whom Transferred	Value	Amount Received
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____

8. REMARKS:

Check each box to show that you have read and understand the section.

- I request that the court appoint an attorney to represent me as I cannot afford to hire one.
- If the court appoints a lawyer, I UNDERSTAND THAT I MAY BE REQUIRED TO REPAY THE SERVICES PROVIDED TO ME BY COURT APPOINTED COUNSEL IF I AM CONVICTED UNLESS THE COURT FINDS THAT I AM OR WILL BE FINANCIALLY UNABLE TO PAY.
- I understand that if I do not agree with the eligibility findings made by the court, I may file a motion with the court.
- I understand that I am required to notify the OCC and the court of every change of address while I still owe the state for the cost of my representation. I further understand that if at any time prior to the disposition of my case, my financial condition changes, I must notify the Court and OCC immediately.
- If I am convicted and the Court finds that I have the ability to pay attorney fees and costs, I hereby authorize the State of New Hampshire, Office of Cost Containment to obtain any and all information with regard to my employment and financial condition from government agency, bank, creditor or employer.

Verification: I verify the truth and accuracy of all facts alleged within this document to the best of my knowledge and further verify that all facts contained in this document are given to induce appointment of counsel because I am currently unable to retain private counsel. By signing or affixing my electronic signature to this document I acknowledge my understanding that any false statements made in this document are punishable as perjury which may include a fine or imprisonment for not more than 7 years or both.

Date

Applicant Signature

FOR COURT USE

Application Approved. Application Denied.

Date

Signature of Judge (required only if request is denied)