

Declaration of Agreement

I _____ / and my family members¹ hereby declare to allow the Legal Aid Commission to investigate my / my family members' and my² bank account(s) as well as other data that help to verify the available assets in accordance with Article 17, Paragraph 3 of the Law 13/2012 "Legal Aid System"³.

Name of Family Members		Signature
1		
2		
3		
4		
5		
6		
7		
8		

Applicant(Signature): _____

Date: _____

¹ Cross out where inappropriate.

² Cross out where inappropriate.

³ Application will be rejected if the applicant refuses to or fails to provide the documents, information and permission stated by Article 17 Paragraph 3 of the Law 13/2012 "Legal Aid System" within the specified period.