

CONFIDENTIAL
STATE OF NEW YORK – COUNTY OF WASHINGTON
APPLICATION FOR COUNSEL CRIMINAL/FAMILY COURT - PART I

Please return application to:
 Washington County Assigned Counsel Office
 383 Broadway, Building C – Basement
 Fort Edward, New York 12828
 Phone: (518)-746-2403, Fax: (518)-746-2406
 assignedcounsel@washingtoncountyny.gov

APPLICANT INFORMATION

Full Name:

| | | |
|--|--------------------------|----------------------------|
| Date of birth: | SSN: | Home Phone: Cell Phone: |
| Current address: | | Email Address: |
| City: | State: | ZIP Code: |
| Marital Status: | Were you born in the US? | ____ Yes ____ No |
| Number of Financial Dependents in Household (list all, including minors, elderly or disabled): | | |

CURRENT CASE INFORMATION

CRIMINAL CHARGES:

| | | | |
|---------------------------------|----------------------|--------------------|-------------------|
| Court: | Judge: | Arrest Date: | Arraignment Date: |
| Charges: | | | Next Court Date: |
| | | | |
| Alleged Co-Defendant(s): | Alleged Witness(es): | Alleged Victim(s): | |
| | | | |
| Family Court: | | | |
| Court: Washington County | Judge: | Next Court Date: | |
| Matter: | | | |
| Other Parties: | Witness(es) | | |

EMPLOYMENT INFORMATION

Occupation (if student, indicate the school attending; if self-employed, describe what type of work you do):

Current Employer - Name and Address:

Net Pay (Take Home): \$ _____ per (circle one) week / bi-weekly / month / year

OTHER CIRCUMSTANCES

1. Is applicant incarcerated, detained, hospitalized or confined to a mental health facility? ____ Yes ____ No
2. Is applicant currently receiving, deemed eligible or pending receipt of need-based PA? ____ Yes ____ No
3. Has applicant been deemed eligible for assigned counsel in the past six (6) months? ____ Yes ____ No

SIGNATURE OF APPLICANT

Signature of applicant: _____ Date: _____

**APPLICANT STOP HERE: IF FURTHER INFORMATION IS NEEDED, THE
 SCREENER WILL ASSIST YOU WITH PART II**

CONFIDENTIAL APPLICATION FOR COUNSEL – PART II

OTHER INCOME (DOCUMENTATION MAY BE REQUIRED)

Do you receive a pension, annuity or retirement payments? ____Yes____No If yes, list amount: \$ _____

Do you currently receive income from owned real estate? ____Yes____No If yes, list amount: \$ _____

List other sources of income you receive (do not include child support or public assistance):

1.

2.

ASSETS (BANK STATEMENT/DOCUMENTATION MAY BE REQUIRED)

List amount in the following bank accounts: Checking \$ _____ Savings \$ _____

Do you own real estate? ____Yes____No If yes, list/estimate market value and amount owed for each property below:

1. Primary Residence Exception (apply here): Market Value \$ _____ Amount Owed \$ _____

2.

3.

List any vehicles owned **not necessary** for basic life activities: (For example – Cars, Boats, RV's, ATV's, Snowmobiles, Motorcycles)

1. Vehicles : Market Value \$ _____ Amount Owed \$ _____

2. Market Value \$ _____ Amount Owed \$ _____

3. Market Value \$ _____ Amount Owed \$ _____

List value of Stocks and Bonds:

1. Estimate Market Value \$ _____ Amount Owed \$ _____

2. Estimate Market Value \$ _____ Amount Owed \$ _____

MONTHLY LIVING EXPENSES (DOCUMENTATION MAY BE REQUIRED)

Food: \$ _____ Rent/Mortgage: \$ _____ Utilities: \$ _____

Transportation/Auto Expenses: Payment \$ _____ Insurance \$ _____

Child Care: \$ _____ Child Support Paid Out: \$ _____ Alimony/Maintenance Paid Out: \$ _____

Medical Expenses: Health Ins.: \$ _____ Co-Pays: \$ _____ Medication: \$ _____ Debts: \$ _____

List other expenses. Include employment-related expenses, school loans/fees, minimum monthly credit card payments, unreimbursed medical expenses, expenses related to age or disability:

1.

2.

3.

SIGNATURE OF APPLICANT

Signed: _____
(Applicant)

Date: _____

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Email: assignedcounsel@washingtoncountyny.gov

There are (6) different ways to apply for assigned counsel. You may:

- 1). Apply in person by visiting the Assigned Counsel Office anytime between 9:00 a.m. and 4:00 p.m., Monday thru Friday
- 2). Fax the completed application to the Assigned Counsel Office at: (518)-746-2406
- 3). Email application to assignedcounsel@washingtoncountyny.gov
- 4). Mail the completed application to the address above
- 5). On the third Wednesday of each month, from 8:30 a.m. to 10:30 a.m., apply in person at the Whitehall Town and Village Court, located at:

57 Skenesborough Drive
Whitehall, NY 12887

- 6). On the third Thursday of each month from 2:00 p.m. to 4:00 p.m., apply in person at the White Creek Town Court, located at:

28 Mountain View Drive
Cambridge, NY 12816

Along with your Application, you are encouraged to provide the following information to assist us in determining your eligibility for assignment of counsel:

- Family Court Summons or Petitions (you may obtain a copy from the court)
- Charges, Complaints, Summonses, Tickets, Supporting Depositions and/or statements
- Identification: (Driver's license, DMV I.D., Social Security card, Military I.D., Learner's Permit, Medicaid Card, Passport, Green Card or Government issued I.D.)

Applicants may contact our office at assignedcounsel@washingtoncountyny.gov for requests to be contacted and any questions regarding applications.