

**PUSAT BANTUAN GUAMAN MAJLIS PEGUAM**  
**BAR COUNCIL LEGAL AID CENTRE**  
(formerly known as LEGAL ADVISORY CENTRE)



PULAU PINANG  
(Founded 1980)

Date: 02<sup>nd</sup> September 2020

CIRCULAR NO. 15/20

To Members of the Penang Bar

**Re: Revised Means Test at LAC**

The National Legal Aid Committee after consultation with all State LACs had proposed standard Means Test Criteria that is applicable to all states which was subsequently approved by the Bar Council.

We hereby attach a copy of the standardised Means Test form and the Criteria for members to take note.

Kindly further note that even if an applicant fails the Means Test but is determined to deserving of Legal Aid based on Human Rights principles, the applicant may still be granted Legal Aid with NLAC approval

For further information, kindly contact the PLAC office at 04-2617451.

Thank you.

Yours sincerely,



**RAVI CHANDRAN**

**Chairman**

**Bar Council Legal Aid Centre Penang**

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**MAIN OFFICE**

No. 2/ GREEN HALL, GROUND FLOOR  
10200 PENANG.  
TEL: 04-2617451 FAX: 04-2616840

**BRANCH OFFICE**

No. 11, 2ND FLOOR, LORONG JERMAL INDAH,  
TAMAN JERMAL INDAH, 12300 BUTTERWORTH.  
TEL: 04-3108451 FAX: 04-3108453



**BAR COUNCIL LEGAL AID CENTRE (PENANG)**

No 21 Green Hall, Ground Floor

10200 Penang

Tel: 04-261 7451 | Fax: 04-261 6840 | E-Mail: lacpg2011@gmail.com

**A. IMPORTANT NOTES FOR PUPILS / STAFF DOING INTERVIEWS**

1. As a general rule, representation will not be given in the following areas of law except with written approval of the Chairperson of the National Legal Aid Committee ("NLAC"):
  - (a) Debt collection
  - (b) Motor accidents
  - (c) Industrial accidents
  - (d) Professional negligence
  - (e) Defamation
  - (f) Bankruptcy, company winding up
  - (g) Will writing, probate and administration
  - (h) Property related matters
  - (i) Conveyancing
  - (j) Criminal cases covered by YBGK
  - (k) Capital offences
  - (l) Preventive detention
  - (m) Forfeiture of property
  - (n) Enforcement of judgement
  - (o) *Mutaah* and matrimonial property (*Syariah* matters)
2. An exception to the exclusion above may be given in appropriate cases if the applicant makes a strong case for it.
3. Legal advice should be given only after consulting a volunteer lawyer.
4. This interview form is to be filled in by the pupil / staff doing the interview.
5. When filling in the form please take note of the following:
  - (a) **Details of the Applicant (page 2 – 3)** – Please make sure that all information is filled in correctly (Item 1 of the Interview Form). The applicant must come personally to the centre. If he/she is unable to come for cogent reasons, please to ask his/her representative to fill in Item 2 of the Interview Form correctly.
  - (b) **Financial Information (page 3 – 5)** – As the decision of whether or not the applicant is eligible for legal aid is based on this information, please ensure that this section is filled correctly. If the applicant says he/she is unemployed, kindly ask how he/she manages for food, accommodation, etc. (especially if they have dependants).
  - (c) **Facts of the Case (page 6)** – Please obtain a full statement of the facts of his/her case. Treat the applicant as if he/she is a client of your firm and find out from him/her what you would like to know in order to help him/her. Read out to the applicant what you have written down and ask whether he/she agrees with it. Please make sure that your handwriting is legible.
  - (d) **Undertaking from the Client (page 8 – 9)** – If the applicant can read, let him/her read the conditions of the undertaking. If the applicant cannot read or understand the conditions, please explain to the applicant. Please show the applicant the amount of disbursement he/she has to pay and explain that this payment is not for legal fees (**Schedule 1**). The applicant has to sign the undertaking and the pupil / staff doing the interview will sign as the witness.
  - (e) Please refer the case to the LAC officer before letting the applicant go back.
  - (f) **Submission of documents (page 10)**: The applicant must submit a photocopy of his/her NRIC and other relevant documents to the LAC and also produce the original of such documents for verification. Photocopying is not allowed to be done at the centre.



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**B. INTERVIEW FORM**

Date: ..... Time Start: ..... Time End: ..... Ref. No: .....  
Supervising staff: ..... Pupil assisting: .....  
Firm: .....  
Tel: ..... Tel: .....

**1) Applicant's particulars**

Name: ..... Age: .....  
NRIC No. / Passport No. / Birth Certificate / Other Identification Document: .....  
Gender: Male  Female   
Address: .....  
.....  
.....  
Tel (Home): ..... Tel (Office): ..... Handphone: .....  
Occupation:  Employee: .....  Self Employed: .....  Not Employed  
Marital status:  Single  Married  Divorced  Widow/Widower

Dependants: Please state all immediate family members – including spouse (if he/she is unemployed), siblings, children and parents – who are fully dependant on applicant's income.

	Name	Age	Gender	Relationship	Working /Studying	Staying with applicant (Y/N)
1						
2						
3						
4						
5						
6						
7						
8						

Other relevant information: .....

2) **Applicant's representative** (in situations where the applicant is not able to come to the centre personally)

Name: ..... Age: ..... Gender: Male  Female   
 NRIC No. / Passport No. / Birth Certificate / Other Identification Document: .....  
 Relationship with applicant: .....  
 Address: .....  
 .....  
 .....  
 Tel (Home): ..... Tel (Office): ..... Handphone: .....  
 Employment:  Occupation: .....  Self Employed  Not Employed  
 Reason why the applicant is not able to come to the centre: .....

3) **Financial information (Table 1, 2 and 3)**

**Table 1: Current Monthly Income**

	<b>Current Monthly Income</b>	<b>Applicant</b>	<b>Spouse</b>	<b>Office use</b>
1	Income from employment (including overtime and commission, etc.) and / or self-employment / business <b>Attach latest salary slip and / or income tax assessment</b>			
2	Monthly value of free / subsidised meals / accommodation / transport (whether provided by employer, family or others)			
3	Pension <b>Attach pension card</b>			
4	Rental income			
5	Contributions / support from family members / others			
6	Benefits received from workmen's compensation/SOCISO (excl. lump sum payments)			
7	Income received from dividends, shares (pro-rated)			
8	Maintenance received			
9	Other income (welfare, receivables on behalf of dependants, etc.)			
<b>Total current monthly income</b>				
<b>Grand total monthly income (applicant + spouse)</b>				

**Table 2: Current Monthly Expenses**

	Current Monthly Expenses	Applicant	Spouse	Office use
1	Income tax / withholding tax / PCB (Pro-rated for those who are self-employed)			
2	Zakat			
3	EPF / SOCSO deductions			
4	Housing: <input type="checkbox"/> Rent <input type="checkbox"/> Housing loan repayments (MAXIMUM deduction allowed: RM700 for both)			
5	Assessment, quit rent, utilities, telephone, internet Attach receipts or other documentation MAXIMUM deduction allowed: RM150 per income earner			
6	Personal deduction (includes food, clothing, transport, personal medical expenses) MAXIMUM deduction allowed: RM500 per income earner			
7	Deduction for dependants. Number of dependants: ..... (Refer to Table 1(a) above) MAXIMUM deduction allowed: RM250 per dependant			
8	Court-ordered maintenance payable Attach court order / relevant documents			
9	Medical expenses for dependants Attach receipts MAXIMUM deduction allowed: RM50 per income earner			
10	Insurance (life and medical) MAXIMUM allowed: RM300 (personal), and RM120 (per dependant up to a maximum of 4 dependants)			
11	Other expenses (give details)			
<b>Total current monthly expenses</b>				
<b>Grand total monthly expenses (applicant + spouse)</b>				

<b>MONTHLY BALANCE INCOME</b> [Grand total of monthly income (Table 1) minus Grand total monthly expenses (Table 2)]		
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**MONTHLY BALANCE INCOME MUST NOT EXCEED:**

- Single person : RM800
- Couple : RM1,000

**Table 3: Assets**

*If any limit is exceeded, the applicant is disqualified.*

	<b>Type of Asset</b>	<b>Value / amount, RM</b>	<b>Office use</b>
1	Do you/your spouse own any house/property      Yes      No Registered in the name(s) of: ..... .....		
	Is it charged to a bank/Government as security for a loan? Yes      No		
	Amount <b>paid-up</b> on the house/property: <b>RM</b> .....		
	Current market value of the house/property		
<b>MARKET VALUE OF HOUSE/PROPERTY MUST NOT EXCEED RM75,000</b>			
2	Do you/your spouse own motor vehicle(s)? A motor vehicle which is required for employment/self-employment (eg. despatch, delivery, sales, etc) is not to be taken into account. <b>Yes      No</b>  <b>Year:</b> <b>Make/Type:</b>		
	Current market value(s) of the <b>motor vehicle(s)</b> ?		
<b>VALUE OF VEHICLES MUST NOT EXCEED: Motorcycle: RM4,500            Car, van, etc.: RM15,000</b>			
3	Total value of <b>cash/savings</b> owned by you/your spouse (FD, etc.)		
4	Total value of <b>shares</b> owned by you/your spouse		
5	Total value of <b>jewellery</b> owned by you/your spouse		
6	Total value of <b>cryptocurrency</b> owned by you/your spouse (Bitcoin, etc.)		
<b>THE TOTAL VALUE OF ITEMS 3 TO 6 MUST NOT EXCEED RM5,000</b>			

4) Facts *(please use additional sheet if necessary)*

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5) What remedies does the applicant want?

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*By completing this form, you hereby expressly consent that the personal information that you provide to the Bar Council, whether now or in the future, may be used, recorded, stored, disclosed or otherwise processed by or on behalf of the Bar Council for the purposes of maintenance of a database for this matter, research and audit, and such ancillary services as may be relevant.*

**INTERVIEW SUMMARY**

*(to be completed at the end of the interview)*

CATEGORY	ACTION									
<input type="checkbox"/> Criminal – others <input type="checkbox"/> Family <input type="checkbox"/> Domestic violence <input type="checkbox"/> Syariah <input type="checkbox"/> Employment <input type="checkbox"/> Miscellaneous — please specify: ..... ..... ..... .....	<input type="checkbox"/> URGENT      Dates (s) : Action (s) : Person (s) :									
	<input type="checkbox"/> ADVICE ONLY <i>(only advice given and no follow up action needed)</i>									
	<input type="checkbox"/> CLOSE MATTER <i>(the interview form will be destroyed yearly)</i>									
	<input type="checkbox"/> OPEN FILE									
	<input type="checkbox"/> REJECTED, due to: <input type="checkbox"/> Being non-cooperative, insufficient information, etc.									
	<table border="0"> <tr> <td><input type="checkbox"/> Means test</td> <td><input type="checkbox"/> Income</td> </tr> <tr> <td><input type="checkbox"/> Assets</td> <td><input type="checkbox"/> Area of law</td> </tr> <tr> <td><input type="checkbox"/> Jurisdiction</td> <td><input type="checkbox"/> Merits</td> </tr> <tr> <td><input type="checkbox"/> Other reason: .....</td> <td>.....</td> </tr> <tr> <td>.....</td> <td>.....</td> </tr> </table>	<input type="checkbox"/> Means test	<input type="checkbox"/> Income	<input type="checkbox"/> Assets	<input type="checkbox"/> Area of law	<input type="checkbox"/> Jurisdiction	<input type="checkbox"/> Merits	<input type="checkbox"/> Other reason: .....	.....	.....
<input type="checkbox"/> Means test	<input type="checkbox"/> Income									
<input type="checkbox"/> Assets	<input type="checkbox"/> Area of law									
<input type="checkbox"/> Jurisdiction	<input type="checkbox"/> Merits									
<input type="checkbox"/> Other reason: .....	.....									
.....	.....									
Action / advice / instructions:										

Name of LAC Chairperson : .....

Date : .....

Signature : .....

**To be filled by LAC staff if applicant is to be represented by a volunteer lawyer**

Date file opened : .....      Ref. No: .....

Name of LAC staff: .....

Means test document checked :     Yes       No

Name of lawyer assigned: .....      Firm: .....

Tel: .....      Fax: .....      Email: .....

Assigned by: .....      Date assigned: .....

Notes: .....

.....

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**C. LETTER OF UNDERTAKING TO BE SIGNED BY THE APPLICANT FOR LEGAL AID**

I ....., NRIC No. / Passport No. / Birth Certificate / Other Identification Document ....., of full age who is a citizen / non-citizen of Malaysia and having address at .....  
.....  
.....  
state the following:

1. I understand that the Bar Council Legal Aid Centre lawyers are volunteer lawyers from the Malaysian Bar fulfilling their professional and social responsibility and this application for legal aid can be rejected for any reason(s) based on the discretion of the Bar Council of Malaysia.
2. I understand that the Bar Council Legal Aid Centre will make reasonable efforts to appoint a volunteer lawyer but it does not guarantee the appointment of the lawyer.
3. I give permission to the Bar Council Legal Aid Centre to have conduct of my matter, through the appointed lawyer, whether in Court or otherwise.
4. I agree:
  - a) to comply with the advice of the lawyer having conduct of my case, and if I am unable to accept that lawyer's advice, he/she may withdraw himself/herself from representing me;
  - b) to surrender my rights towards all costs awarded to me to the Bar Council Legal Aid Centre;
  - c) that if the Court makes an order against me to pay costs to any party, I will be responsible to pay it and the Bar Council Legal Aid Centre will not be liable for it;
  - d) that the Bar Council Legal Aid Centre may, at its own discretion, terminate the legal aid that has been given to me at any time; and
  - e) that I am required to pay costs and disbursements to the lawyer having conduct of my file according to the amount as stated in Schedule 1.
5. I undertake to inform the Bar Council Legal Aid Centre should there be any changes of circumstances to the information that I have given, and based on such new information, I understand that the Bar Council Legal Aid Centre can terminate the legal aid given to me.
6. I acknowledge that all the statement(s) and information that I have provided to the Bar Council Legal Aid Centre are true and I understand that the act of giving false information to the Bar Council Legal Aid Centre is a criminal offence and further the Bar Council Legal Aid Centre can terminate the legal aid given to me.

7. I understand that if I am found to have made a false declaration or failed to make the appropriate declaration, I shall pay all the costs and disbursements that have been incurred by the Bar Council Legal Aid Centre.

Signature of applicant : .....  
Name : .....  
NRIC No. / Passport No. / Birth Certificate / Other Identification Document: .....  
Date : .....

Signature of Witness : .....  
Name : .....  
NRIC No. / Passport No. / Birth Certificate / Other Identification Document: .....  
Date : .....



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**D. LIST OF DOCUMENTS RECEIVED FROM APPLICANT**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_