

Department of Justice

VICTIMS SUPPORT SERVICES

- Victims Assistance Unit

Level 1, 54 Victoria Street Hobart TAS 7000

GPO Box 825 Hobart TAS 7001

Phone: 03 6165 7524 Fax: 03 6173 0215

Email: criminal.injuries@justice.tas.gov.au Web: www.justice.tas.gov.au/victims



APPLICATION FOR VICTIMS OF CRIME ASSISTANCE

Victims of Crime Assistance Act 1976

IT IS IMPORTANT YOU READ THIS INFORMATION GUIDE BEFORE FILLING IN THE APPLICATION FORM.

(Please read, detach and keep for your records)

WHO SHOULD USE THIS FORM?

Primary, Secondary and Related Victims who wish to claim compensation (pain and suffering) for the injuries they have received from an **offence of violence** in Tasmania and/or claim for out of pocket expenses incurred such as medical, loss of earnings, funeral or other expenses.

WHAT IS AN OFFENCE OF VIOLENCE?

An offence of violence is an offence that involves violence by one person against another and includes certain sexual offences.

WHO IS A VICTIM?

A **Primary Victim** is a person against whom the offence is committed.

A **Secondary Victim** is:

- (a) A person who suffers injury as a result of witnessing the offence; or
- (b) A parent, step-parent or guardian of a primary victim who was under 18 years of age at the time of the offence.

A **Related Victim** is:

- (a) The spouse or a child, stepchild, brother, sister, stepbrother or stepsister of a primary victim; or
- (b) A parent or step-parent of a primary victim who was over 18 years of age at the time of the offence; or
- (c) In a personal relationship, within the meaning of the Relationships Act 2003, with a primary victim.

Department of Justice

VICTIMS SUPPORT SERVICES

- Victims Assistance Unit

Level 1, 54 Victoria Street Hobart TAS 7000

GPO Box 825 Hobart TAS 7001

Phone: 03 6165 7524 Fax: 03 6173 0215

Email: criminal.injuries@justice.tas.gov.au Web: www.justice.tas.gov.au/victims



WHEN TO MAKE YOUR CLAIM

You must make your claim within 3 years of the date of the offence, or if there is more than one offence, within 3 years of the first offence.

If it is more than 3 years since the offence, you must apply for an extension of time.

If you were under 18 years old at the time of the offence you must make your claim before you turn 21 years old.

If the crime occurred before 04 August 1976, there is no entitlement to make a claim.

WHAT YOU CAN'T CLAIM FOR

You cannot claim for:

- Loss of, theft of or damage to, property including vehicles and personal effects.
- Expenses that were not incurred by you.
- Expenses for injuries that occurred while you were at work.
- Injuries that were received as a result of the use of a motor vehicle.

CONTACTING THE VICTIMS SUPPORT SERVICES

For further information or help completing the application please contact the Victims Support Services.

Phone (03) 6165 7524
Free call 1300 663 773
Fax (03) 6173 0215
Email criminal.injuries@justice.tas.gov.au
Website www.justice.tas.gov.au/victims

EXPENSES YOU CAN REQUEST

Medical and related expenses: This includes GP, hospital, dental, psychological, pharmaceutical and specialist medical expenses that are **as a direct result** of the injury you sustained from the crime.

You will need to provide receipts for any expenses you have already incurred and quotes for expenses you are likely to incur.

Loss of income: Actual income lost as a result of missing work due to your injuries.

Funeral Expenses: Costs for burial, cremation or other services for victims who have died as a result of their injuries.

Solicitor fees: Fees charged by a solicitor that relate to the making of your claim.

APPLICATION FOR VICTIMS OF CRIME ASSISTANCE

Victims of Crime Assistance Act 1976

SECTION 1

DETAILS OF THE PERSON APPLYING

Full Name: _____

Date of Birth: _____

Address: _____

_____ Postcode _____

Home Phone: _____

Mobile: _____

Email address: _____

If you are not available, would you like us to leave a message? Yes No

Are you a:

- Primary Victim
- Secondary Victim
- Related Victim
- Applying on behalf of another person

If you are not the primary victim, how are you related to the primary victim?

Complete this section if you are applying on behalf of another person

If the Applicant is under 18 years of age or is unable to complete the claim themselves, please complete their details below:

Full name of the Applicant: _____

Applicant's Date of Birth: _____

Your relationship to the Applicant: _____

Reason for making this claim on their behalf? _____

Details of legal representative (if applicable)

Solicitors Name: _____

Legal Firm: _____

Address: _____

_____ Postcode _____

Phone number: _____

SECTION 2

DETAILS OF THE OFFENCE/S

When did the offence/s occur?

a) Date ___/___/___

OR

b) Between ___/___/___ and ___/___/___

Where did the offence happen? _____

Did the offence happen while you were at work? Yes No

If yes, have you claimed workers compensation? Yes No

What is the name of the offender or offenders? _____

What was your relationship to the offender/s _____

Details of the offence/s

Please tell us briefly what happened:

Please continue on a separate sheet of paper if insufficient space is provided

Has the crime been reported to the Police? Yes No

If no, please provide the reasons why: _____

When was the report made to Police? ____/____/____

Name of Police Officer(s): _____

Station at which report was made: _____

Offence Report No. (if available): _____

(Please attach a copy of any documentation given to you by Police)

Have charges been laid against the offender(s)? Yes No Don't Know

If yes, please provide details of the charges laid _____

Has the offender been to Court on these charges? Yes No Don't Know

If yes, what was the outcome? _____

Was there a compensation order made by the Magistrate or Judge? Yes No Don't Know

If yes, have you applied for that compensation in court? Yes No

If not, please explain why not _____

Have you recovered any compensation from the offender or the courts? (Civil) Yes No

Details _____

Have you proceeded with any other type of claim for damages or compensation? (such as National Redress) Yes No

Details _____

Do you know whether the offender:

is employed Yes No Don't Know

if yes, where _____

owns a house/unit/land Yes No Don't Know

if yes, where _____

owns a car/motorbike/caravan Yes No Don't Know

Any details _____

owns anything else of value Yes No Don't Know

any details _____

any other details about the offender _____

SECTION 3

INJURIES RECEIVED AS A RESULT OF THE OFFENCE/S

Please list any physical injuries suffered **as a direct result** of the offence/s:

Can these injuries be verified by medical records or reports? Yes No

Did you attend a Hospital? Yes No

If yes, please provide details of the Hospital _____

Have you seen your GP about the injuries you received? Yes No

If yes, please provide name and address of GP _____

Do you have private Health Insurance? Yes No

Have you had an appointment with a Psychologist and/or Counsellor in relation to the offence/s against you Yes No

If yes, please provide the name and address of the Psychologist and/or Counsellor

If you have not already had an appointment, are you intending to make an appointment in the future? Yes No

Do you authorise Victims Support Services to request copies of medical records and/or counselling or psychological reports to support your application? Yes No

SECTION 4

DETAILS OF EXPENSES INCURRED

<p>Have you lost income as a result of the injuries?</p>	<p><input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Amount \$..... (after tax)</p>
<p>I can verify the amount via a letter from my employer or other documents.</p> <p>(This must show the days you could not work and the amount of money you did not earn as a result)</p>	<p><input type="checkbox"/>Yes <input type="checkbox"/>No</p>
<p>Did you receive any benefits from Centrelink or any other source while you were unable to work?</p> <p>Details:</p>	<p><input type="checkbox"/>Yes <input type="checkbox"/>No</p>

Details of any other expenses not able to be recovered from any other source.
(Please note, these expenses must be as a direct result of the injury incurred.)

<p>Pharmaceutical Expenses (Details of items to be provided)</p> <p>I have attached copies of relevant accounts/receipts.</p>	<p>Amount \$.....</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p>
<p>Medical Expenses (Outline details of services provided)</p> <p>I have attached copies of relevant accounts/receipts</p>	<p>Amount \$.....</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p>

<p>Other Medical/Dental/Specialist Treatment Expenses (Outline details of services provided)</p> <p>I have attached copies of relevant accounts/receipts</p>	<p>Amount \$.....</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p>
<p>Details of other reasonable costs incurred as a result of the offence/s: (Outline details)</p> <p>I have attached copies of relevant accounts/receipts</p>	<p>Amount \$.....</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p>

COSTS OF MAKING THIS APPLICATION

Please be aware that under the *Victims of Crime Assistance Act, 1976*, the payment of any costs associated with the preparation of your application, such as solicitors' fees and medical report fees, are at the discretion of the Commissioner and may be deducted from your award. If your application is rejected, then you may be responsible for the payment of these costs.

<p>Details of any costs charged by a solicitor in respect to this application.</p>	<p>Amount \$.....</p>
<p>Details of any other costs incurred in making this application. Please provide details and attach receipts or accounts.</p>	<p>Amount \$.....</p>

SECTION 5

HEARING PREFERENCES

The Commissioners would prefer that the claimant attended a hearing to discuss the application. The offender will not be present.

If you choose, you can have the application decided on the basis of the information you have provided in this form and any attachments.

Do you wish to attend a hearing OR have the application decided on the basis of the information provided?

I wish to attend a hearing

OR

I don't want to attend personally but I want to have a telephone hearing

OR

I don't want to attend a hearing and want my application decided on the basis of my written application

SECTION 6

BANK ACCOUNT DETAILS

If your application results in a financial award from the Victims of Crime Assistance fund please provide your bank account details so monies can be deposited directly into your account.

Please note: Not all applications will result in a financial award.

Name on the Account _____

BSB Number: _____

Account Number: _____

Name of Bank: _____

Branch: _____

SECTION 7

Statutory Declaration

I, _____

of _____

solemnly declare that the facts and statements set out in this application are true to the best of my knowledge and belief and, I understand that it is an offence to make a false declaration.

I make this solemn declaration by virtue of Section 14 of the *Oaths Act 2001*.

Declared at _____ this _____ day of _____ 20_____

Signature: _____

Before me: _____

Justice of the Peace/Commissioner for Declarations

Department of Justice

VICTIMS SUPPORT SERVICES

- Victims Assistance Unit

Level 1, 54 Victoria Street Hobart TAS 7000

GPO Box 825 Hobart TAS 7001

Phone: 03 6165 7524 Fax: 03 6173 0215

Email: criminal.injuries@justice.tas.gov.au Web: www.justice.tas.gov.au/victims



MEDICAL AUTHORITY

To:

I, _____

authorise the release of my medical notes, records and reports in relation to treatment I received for injuries I received, to Victim Support Services, to be faxed, emailed or posted to them as soon as possible.

Signed: _____

Name:

DOB:

Our Ref:

Date:

The information in this transmission may be confidential and/or protected by legal privilege, and is intended only for the person or persons to whom it is addressed. If you are not such a person, you are warned that any disclosure, copying or dissemination of the information is unauthorised. If you have received the transmission in error, please advise this Office and delete all copies of the transmission from your records. No liability is accepted for any unauthorised use of the information in this transmission.

(Please read, detach and keep for your records)

Department of Justice

VICTIMS SUPPORT SERVICES

- Victims Assistance Unit

Level 1, 54 Victoria Street Hobart TAS 7000

GPO Box 825 Hobart TAS 7001

Phone: 03 6165 7524 Fax: 03 6173 0215

Email: criminal.injuries@justice.tas.gov.au Web: www.justice.tas.gov.au/victims



Victims of Crime Assistance frequently asked questions

What is Victims of Crime Assistance?

The Tasmanian Government has set up a fund to assist victims of violent crimes and sexual offences. This is known as Victims of Crime Assistance, also called compensation. It is designed to provide financial assistance where it is needed.

The Victims Assistance Unit (VAU) administers the scheme and the decision about any compensation awarded is made by a Criminal Injuries Commissioner.

Am I eligible to apply for Victims of Crime Assistance?

If you are a victim of a violent crime or sexual offence, that happened in Tasmania and you have suffered an injury, you can make an application for compensation. An injury includes both physical and psychological. The offence must have happened after 4 August 1976.

Your application will be assessed once it arrives. If you do not meet the criteria then you will be advised as soon as possible.

How much am I going to get?

The Commissioner decides how much you will get if your application is successful. The VAU do not have any say on this. There are maximum amounts that can be awarded. This is legislated and cannot be changed. You may be awarded compensation up to the maximum amount depending on the impact the crime has had on you and any out of pocket expenses you have.

Is there a time limit for making an application?

Yes. An application must be submitted to us within 3 years of the offence taking place. If it has been more than 3 years, you must apply for an extension of time. This may be granted if there are exceptional circumstances why you were unable to make your application earlier.

Child victims (under 18 years), have until they turn 21 years old to make an application.

What sort of assistance can I get?

You may be given funding for psychological counselling, dental and medical expenses or other out of pocket expenses such as loss of income. This is at the discretion of the Commissioner.

The Commissioner may also award compensation for “pain and suffering”. This is for the impact the crime and the injury has had on you. Again this is at the discretion of the Commissioner.

If you are unable to provide receipts for your expenses or proof of your loss of income, the Commissioner may not reimburse you for these.

What if I need money urgently?

The VAU is not a crisis service. We cannot make immediate payments. You may apply for an interim or “early” award but this is for things like urgent dental or medical treatment or psychological counselling.

How do I apply?

You need to fill in the application form and send it in with any receipts or quotes you have and a letter from your employer if you have lost income as a result of the incident. Post your application to:

Victims Support Services
GPO Box 825
HOBART TAS 7001

Do I have to use a solicitor?

You do not have to use a solicitor. The application form has been designed so most people are able to easily complete it themselves. You will not receive more or less compensation if you use a solicitor. If your application is not successful, you will be liable for any solicitor costs. If it is successful, the VAU will pay reasonable solicitor costs.

The Victims Support Service has counsellors available who can assist you to make your application if necessary. You will need to contact us to discuss this and make an appointment.

What else do I have to do?

Once you have completed an application form, the VAU will request medical reports and information from Police. It is important to make sure you have completed all sections of the application form and provided receipts or quotes and a letter from your employer if you have lost income. We will contact you if we need further information. Post your application to Victims Support Services, GPO Box 825, Hobart TAS 7001

How long does the process take?

There is a lot of material that the VAU needs to gather to support your application. This takes time. You need to allow at least 12 months for this to happen. It may be longer depending on how quickly we can get the information together.

Providing as much information as possible when you make your application will speed up the process.

Does the offender have to be convicted for me to be eligible to make an application?

No. At times the offender may not end up being convicted or an offender may not have been identified. This does not affect your right to make an application. The Commissioner however must be satisfied that the offence occurred and that you have taken all reasonable steps to assist the police in the identification and prosecution of the offender.

What happens if I don't assist the Police or Prosecution?

If you do not cooperate with Police or Prosecution without reasonable excuse, the Commissioner may refuse to award you compensation or reduce the amount.

Why haven't I heard anything for a while?

It is not possible to update you at every step of the process. There is a lot of work being done in the background and we will only contact you when your application is nearing completion or we require further information from you. You are always welcome to contact us to enquire at what stage your application is up to.

What if I don't agree with the Commissioner's decision?

The decision of the Commissioner is final. The only avenue of review is through the Supreme Court and you will most likely need to employ a Solicitor to assist you. If your appeal is not successful, then you may be liable for any costs.

What if I need to talk to someone about my application?

You can contact the VAU on (03) 6165 7524 or 1300 663 773 if you wish to discuss your application. Please have your reference number handy when you call. It can be found on the top of any letter we send you.