

Exceptional Circumstances Payment (ECP) Request: Family – Support, Custody, Access

In some cases, where exceptional circumstances (EC) can be demonstrated, an increase in payment may be granted where an account exceeds the tariff maximum. If your account exceeds the tariff maximum, and you want to apply for an EC payment, fill out this form and include it when submitting the account.

Account date: _____ Date of request: _____

Requestor Information

Lawyer information

Name: _____

Solicitor #: _____

Phone: _____

Email: _____

Client information

Name: _____

Client #: _____

Names of co-accused / other parties: _____

Tariff Hours

Have you used all available tariff hours? Yes No

If no, please do so before submitting any accounts requesting exceptional circumstances payments.

If yes, how many hours beyond the tariff have you spent? _____

How many hours would you like considered for exceptional circumstances payment? _____

Legal Aid Tariff

The Legal Aid Tariff of Fees is meant to reflect the fees customarily paid by a reasonable private paying client of modest means. These fees apply for all legal aid services, except in exceptional circumstances. Should your account exceed the tariff maximum and you wish Legal Aid Saskatchewan to consider paying the account as billed, please explain the exceptional circumstances of your case based on the following factors (click all that apply):

Actions Taken

Successful?

Judicial Case Conference

Initiated by: client O/P

yes no

Application Without Notice

yes no

Application for Interim Order for:

Parenting
 shared primary

yes no

yes no

Decision-making
 joint sole

yes no

Spousal Support
 retroactive ongoing

yes no

Child Support
 retroactive ongoing
 s. 3 s. 3(2)(a) s. 3(2)(b) s. 7 s. 9

yes no

yes no

Details: _____

Pre-Trial Settlement Conference

Settlement reached on:
 all issues
 in part, with the remaining issues to be addressed at trial or otherwise as follows (specify dates) _____

Application for Judgment for:

Divorce

Spousal Support quantum: _____/mo.
duration: _____
review date: _____
termination date: _____

Parenting yes no

shared primary yes no

Decision-making

joint sole yes no

Child Support

retroactive ongoing yes no

s. 3 s. 3(2)(a) s. 3(2)(b) s. 7 s. 9 yes no

Other yes no

Details: _____

Complexities

Child(ren)'s exceptionalities

developmental / cognitive / physical impairments

Client's exceptionalities

cognitive / physical impairments

mental health/addiction issues

Details: _____

Income Imputation

Self-employed payor Underemployed payor

other _____

Abuse Allegations

child abuse

physical

sexual

psychological/emotional

spousal abuse

physical

sexual

psychological/emotional

financial

coercive control

Withholding / Overholding

alienation absconding Hague Convention Matters

Relevant Factors

- Disclosure from o/p requests from o/p
 - financial/income disclosure
 - medical disclosure
 - other: _____
- Expert Evidence required
- Multiple children parents parties having/seeking standing
- Lengthened timelines due to:
 - multiple adjournments at request of
 - petitioner respondent third party court's direction
- Client in another jurisdiction O/P in another jurisdiction
 - attorn to SK jurisdiction must establish jurisdiction
- Well-Funded O/P
- Self-Represented O/P

Case details

Please provide case details and the factual circumstances that support the factors selected in the section above. Attach any relevant documents to support your request for an exceptional circumstances payment.

Note: If you were asked to prepare an opinion letter, please attach.

Private Bar Director Exception Request

Are there any other factors not articulated in the above criteria? Yes No

If yes, provide details below.

Note: This request is to be used rarely and only in circumstances when counsel can clearly demonstrate that the exceptional circumstances test has been met.



For more information on exceptional circumstances payments see the Legal Aid Saskatchewan's Billing and Payments Handbook.

For assistance in completing this form please contact the Legal Aid Saskatchewan Private Bar Services at 1-306-933-5300 or email pboffice@legalaid.sk.ca.

I certify that the information included in this form is complete, true, and accurate.

Name: _____

Signature: _____

Date: _____

Please attach the completed Exceptional Circumstances Payment (ECP) Form to your account and email PBAccounts@legalaid.sk.ca with the subject line **ECP Request - LSN#**.