****INSTRUCTIONS FOR SELF-REPRESENTED APPLICANTS****

Application to Waive Fees and Costs

NOTICE: If you are unable to pay the initial filing fee and other costs associated with this legal action, you have the right to request a waiver of these fees and costs pursuant to Pennsylvania Rule of Judicial Administration 1990. Please request an Application to Waive Fees and Costs from the clerk. The filing office will docket your legal action and your application immediately without an initial payment, subject to review by the Court.

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY. IF YOU DO NOT PROVIDE THE REQUIRED INFORMATION, YOUR APPLICATION MAY BE DELAYED OR DENIED.

1. Fill out the Application to Waive Fees and Costs ("Application"). Be sure to include <u>all</u> requested information and check which case type applies to your court action.

2. Bring your completed Application to the Court Administration office on the second floor of the Erie County Courthouse, room 204/205.

3. A representative from Court Administration will review your completed Application to determine eligibility.

4. If your Application is approved, your Application will be granted without the necessity of review by a Judge.

5. If your Application is not approved, Court Administration will issue a Waiver Review Notice and you may have the matter reviewed by the Court. To obtain Court review, you must take your Application and Waiver Review Notice to the appropriate Motion Court for your type of case:

    - Family / Orphans' Division Motion Court is held Monday through Thursday at 9:00 A.M.
    - Trial Division Motion Court (Civil / Criminal) is held Monday through Thursday each week at 9:00 A.M.
    - **MOTION COURT BEGINS PROMPTLY AT 9:00 A.M. IF YOU ARRIVE LATE, YOUR APPLICATION MAY NOT BE REVIEWED THAT DAY**.

6. Upon judicial review, the Court may deny your Application with or without a hearing, or may direct you to submit supplemental information to substantiate your Application.

7. The court may vacate an Order granting your Application if the court later finds that the Application or supplemental information was materially inaccurate or you are able to pay the fees and costs.

_____	:	IN THE COURT OF COMMON PLEAS
	:	OF ERIE COUNTY, PENNSYLVANIA
Plaintiff	:	
vs.	:	NO. _____
	:	
	:	
_____		
Defendant	:	

APPLICATION TO WAIVE FEES AND COSTS

CASE TYPE

CIVIL TRIAL DIVISION	☐	FAMILY DIVISION - DIVORCE	☐
CRIMINAL DIVISION	☐	FAMILY DIVISION - CUSTODY	☐
ORPHANS' COURT DIVISION	☐	FAMILY DIVISION - SUPPORT	☐

Party Name:

_____
First Middle Last

Residence / Address:

_____
Street Address City, State ZIP

☐ *Check this box if you are currently without a house or apartment*.

1. **Do you currently receive one or more of the following public benefits**?
   - Supplemental Nutrition Assistance Program (SNAP) (food stamps)
   - Medicaid
   - Supplemental Security Income (SSI) (Not Social Security Disability Insurance (SSDI))
   - Temporary Assistance to Needy Families (TANF)
   - Public Housing or Section 8 Housing
   - Needs-based VA Pension
   - Low-Income Energy Assistance
   - Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
   - Other need-based federal, state, or local program: *(name of program)*

☐ **Yes** ☐ **No**

If you answered "Yes" above, skip the remainder of this form and sign/date the VERIFICATION at the end of this form

If you answered "No" above, complete the remainder of this form and sign/date the VERIFICATION at the end of this form

2. I am providing the following information about people who live with me:

I support ____ adult children, who are incapable of self-support due to a physical or mental disability.

I support ____ children under 18.

GROSS MONTHLY INCOME (income before paying taxes and other deductions):

$ _____ monthly gross wages
Occupation:_____. Employer:_____

$ _____ unemployment compensation. I have been unemployed since *(date)*. My last employer was *(name of employer)*.

$ _____ money received from other people.

$ _____ ☐ Retirement/Pension ☐ Disability

$ _____ ☐ Workers Comp ☐ Social Security

$ _____ ☐ Child/Spousal support ☐ Other sources:
*Describe other sources:*_____
_____

$ _____ Total monthly gross income

ASSETS (Current Value):

$ _____ Cash

$ _____ Bank accounts or other financial assets

$ _____ Primary vehicle

$ _____ Other vehicles

$ _____ House

$ _____ Other real estate

$ _____ Other property *(describe):*

_____

_____

$ _____ **Total value of property**

MONTHLY EXPENSES YOU PAY:

$ _____ Rent/mortgage payment

$ _____ Food and household supplies

$ _____ Utilities, including cell phone

$ _____ Clothing and other personal expenses

$ _____ Medical and dental expenses/insurance

$ _____ Child care

$ _____ Transportation, including car payments and repairs

$ _____ Child and spousal support or alimony

$ _____ Other expenses: *(describe)*

_____

_____

$ _____ **Total monthly expenses**

Are there other facts that you would like the court to know about your circumstances that may help the court decide whether to grant your application, such as you are experiencing homelessness or you have health issues? If yes, please explain:_____

_____

_____

VERIFICATION

I understand that I have a continuing obligation to inform the court of an improvement in my financial circumstances that would permit me to pay the fees and costs in this case. If I fail to inform the court of any changes in my circumstances, I understand that the court may rescind the waiver of fees and costs and order me to pay those fees and costs.

I verify that the statements made in this application are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

_____ _____

Date Applicant's Signature

_____	:	IN THE COURT OF COMMON PLEAS
	:	OF ERIE COUNTY, PENNSYLVANIA
Plaintiff	:	
vs.	:	NO. _____
	:	
	:	
_____		
Defendant	:	

ORDER

AND NOW, to-wit, this _____ day of _____, 20_____, the above Application to Waive Fees and Costs is _____.
(Granted / Denied)

If granted, the Applicant shall not be required to pay any cost or fee imposed or authorized by Act of Assembly or general rule which is payable to the offices of the Clerk of Records (Clerk of Courts, Prothonotary, Recorder of Deeds, Register of Wills / Orphans' Court), or post bond or other security for costs as a condition for commencing an action or proceeding or taking an appeal. If there is a monetary recovery by judgment or settlement in favor of the Applicant, the exonerated fees and costs shall be taxed as costs and paid to the appropriate office of the Clerk of Records by the party paying the monetary recovery. In no event shall the exonerated fees and costs be paid to the Applicant-indigent party.

BY THE COURT:

_____

Judge