

N/C

WHAT TO DO IF YOU CANNOT PAY THE FILING FEE

** Getting a Fee Waiver*

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Self-Help Center
#10

HOW TO GET THE FILING FEE WAIVED
RCW 36.18.022

CHECKLIST

Use the forms and instructions in this packet only if the following factors apply to your situation:

- * You want to file a Petition or a new case under RCW Chapter 26 (Domestic Relations). The types of cases and related filing fees are as follows:

	Filing Fee
Dissolution of Marriage	\$314.00
Legal Separation	\$314.00
Invalidity of Marriage	\$314.00
Domestic Partnership	\$314.00
Establishment of Parentage	\$260.00
Nonparental Custody	\$260.00
Modification (Out of County)	\$260.00
Modification of Child Support (Whatcom County Order)	\$ 56.00
Modification/ Adjustment of Custody Decree/ Parenting Plan (Whatcom County Order)	\$ 56.00

AND

- You would like to request the court waive or defer those fees based on your current financial situation.

READ ME: It is very important for you to know that when you sign a court document, you may be helping or hurting your court case. Before you sign any court document or get involved with a court case, it is important that you carefully read the document to make sure you are doing the right thing. You may also want to contact a lawyer for legal advice and help with those issues you do not understand. The Whatcom County Bar Association has a list of local attorneys who can give you legal advice and who can help you on a task-by-task basis for a fee. If you need help with the forms, procedures and rules of the court, there is a Court Facilitator available to assist you.

INSTRUCTIONS

There is a fee for filing a new case. If you cannot pay the filing fee, you can ask the Court to waive the filing fee. To make this request, you need to fill out the Request for Waiver of Civil Filing Fees to be presented for approval by a Commissioner. Do this when you are ready to file petition and your papers are completed.

COMPLETING THE FORMS

Sealed Financial Source Documents: Complete the caption (the party initiating and filing the action is the Petitioner; the other party is the Respondent). Put a check in the box next to "Motion/Declaration for Waiver of Civil Filing Fees and Surcharges (MTAF), and that corresponds with any additional documents you are submitting. Sign below "Submitted by:".

Motion and Declaration for Waiver of Civil Fees and Surcharges: Complete the caption, as above.

- Paragraph 1.1 Check the appropriate box.
Paragraph 1.2 No action required.
Paragraph 2.1 No action required.
Date/sign and print name where indicated.
Paragraph 3.1 Refer to Financial Statement, which you will attach to this Motion.
Paragraph 3.2 Add any additional information you would like the court to consider.

Indicate the city and state where you are signing the documents, and the date. Sign and print your name, where indicated.

Financial Statement (Attachment): Financial Statement: Complete all the blanks. If something does not apply to your situation, write "N/A." If you do not know the answer, write "Unknown." Then date and sign at the bottom. The court will review this document to see whether they should waive your fee or not. You should also attach a copy of any documents that prove low income, such as an award letter for government assistance or your three most recent pay stubs.

Order Re Waiver of Civil Fees and Surcharges: Complete the caption.

Basis: Check appropriate box.

Sign on the line under "Presented By:"

The Commissioner will complete the rest of the Order.

OBTAINING THE COURT'S SIGNATURE

Bring your completed documents that you wish to open your case with, and the forms to request Fee Waiver, to the Clerk's Office, Room 301. Your paperwork will be submitted to a Commissioner for the court's approval or denial. Call the Clerk's Office (360-778-5560) in 2 business days to see if your waiver has been approved or not.

If not approved, you will need to come in and pay the filing fee, get your case number, and proceed with serving copies on the other party.

If you are approved, you will be given your case number, which you will write on all of your document copies prior to serving them on the other party.

Superior Court of Washington, County of Whatcom

In re:

Petitioner/s (person/s who started this case):

And Respondent/s (other party/parties):

No. _____

Sealed Financial Source Documents
(Cover Sheet)
(SEALFN)

Clerk's action required.

For use in Family Law and Guardianship cases.

Sealed Financial Source Documents
(Cover Sheet)

Use this form as a cover sheet to keep your financial documents private from the public. On the first page of each document, write the word "SEALED" 1 inch from the top of the page.

Check the documents you are attaching to this cover sheet to be sealed:

- Income tax records
- Credit card statements
- Checks or the equivalent
- Check registers
- Other financial information sealed by court order (specify): _____
- Pay stubs or other proof of earnings
- Bank statements
- Loan application documents
- Retirement plan orders

Submitted by: Petitioner or his/her lawyer Respondent or his/her lawyer

Sign here

Print name (if lawyer, also provide WSBA #)

Important! The other person and the lawyers in your case can see your sealed documents. If you need to keep your address information private for safety reasons, you may cross out or delete your address information.

**Superior Court of Washington
For Whatcom County**

No. _____

Petitioner/Plaintiff,
vs.

**Motion and Declaration For Waiver of
Civil Fees and Surcharges
(MTAF)**

Respondent/Defendant.

I. Motion

- 1.1 I am the petitioner/plaintiff respondent/defendant in this action.
- 1.2 I am asking for a waiver of fees and surcharges under GR 34.

II. Basis for Motion

- 2.1. GR 34 allows the court to waive "fees or surcharges the payment of which is a condition precedent to a litigant's ability to secure access to judicial relief" for a person who is indigent. As outlined below, I am indigent.

Dated: _____

Signature of Requesting Party

Print or Type Name

III. Declaration

I declare that,

- 3.1 I cannot afford to meet my necessary household living expenses and pay the fees and surcharges imposed by the court. Please see the attached Financial Statement, which I incorporate as part of this declaration.

3.2 In addition to the information in the financial statement I would like the court to consider the following:

(Check if applies.) I filed this motion by mail. I enclosed a self-addressed stamped envelope with the motion so that I can receive a copy of the order once it is signed.

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at (city) _____, (state) _____ on (date) _____.

Signature

Print or Type Name

Case Name: _____ Case Number: _____

Financial Statement (Attachment)			
1. My name is: _____			
2. <input type="checkbox"/> I provide support to people who live with me: How many? _____ Age(s): _____			
3. My Monthly Income:		6. My Monthly Household Expenses:	
Employed <input type="checkbox"/> Unemployed <input type="checkbox"/>		Rent/Mortgage:	\$ _____
Employer's Name: _____		Food/Household Supplies:	\$ _____
Gross pay per month (salary or hourly pay):	\$ _____	Utilities:	\$ _____
Take home pay per month:	\$ _____	Transportation:	\$ _____
4. Other Sources of Income Per Month in my Household:		Ordered Maintenance actually paid:	\$ _____
Source: _____	\$ _____	Ordered Child Support actually paid:	\$ _____
Source: _____	\$ _____	Clothing:	\$ _____
Source: _____	\$ _____	Child Care:	\$ _____
Source: _____	\$ _____	Education Expenses:	\$ _____
Sub-Total:		Insurance (car, health):	\$ _____
<input type="checkbox"/> I receive food stamps.		Medical Expenses:	\$ _____
Total Income, lines 3 (take home pay) and 4:		Sub-Total:	
		\$ _____	
5. My Household Assets:		7. My Other Monthly Household Expenses:	
Cash on hand:	\$ _____		\$ _____
Checking Account Balance:	\$ _____		\$ _____
Savings Account Balance:	\$ _____		\$ _____
Auto #1 (Value less loan):	\$ _____		\$ _____
Auto #2 (Value less loan):	\$ _____	Sub-Total: \$ _____	
Home (Value less mortgage):	\$ _____	8. My Other Debts with Monthly Payments:	
Other:	\$ _____		\$ _____ /mo
Other:	\$ _____		\$ _____ /mo
Other:	\$ _____		\$ _____ /mo
Other:	\$ _____		\$ _____ /mo
Other:	\$ _____	Sub-Total: \$ _____	
Total Household Assets:		Total Household Expenses and Debts, lines 6, 7, and 8:	
		\$ _____	
Date: _____		Signature: _____	

**Superior Court of Washington
For Whatcom County**

Petitioner/Plaintiff,
vs.

Respondent/Defendant.

No. _____

**Order Re Waiver of Civil Fees and
Surcharges**

- Granted (ORPRFP)**
 Denied (ORDYMT)
 Clerk's Action Required 3.1

I. Basis

The court received the motion to waive fees and surcharges filed by or on behalf of the
 petitioner/plaintiff respondent/defendant.

II. Findings

The Court reviewed the motion and supporting declaration(s). Based on the declaration(s) and any relevant records and files, the Court finds:

- 2.1 The moving party is indigent based on the following: He or she:
- is represented by a qualified legal aid provider that screened and found the applicant eligible for free civil legal aid services; and/or
 - receives benefits from one or more needs-based, means-tested assistance programs; and/or
 - has household income at or below 125% of the federal poverty guideline; and/or
 - has household income above 125% of the federal poverty guideline but cannot meet basic household living expenses and pay the fees and/or surcharges; and/or
 - other: _____

2.2 The moving party is not indigent.

2.3 Other: _____

III. Order

Based on the findings the court orders:

3.1 The motion is granted, and

all fees and surcharges the payment of which is a condition precedent to the moving party's ability to secure access to judicial relief are waived.

other: _____

3.2 The motion is denied.

Dated: _____

Judge/Commissioner

Presented by:

Signature of Party or Lawyer/WSBA No.

Print or Type Name Date