

IN THE CIRCUIT/COUNTY COURT OF THE SEVENTH JUDICIAL CIRCUIT
IN AND FOR VOLUSIA COUNTY, FLORIDA

CASE NO. _____

Plaintiff/Petitioner or In the Interest of

vs.

Defendant/Respondent

APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS

Notice to Applicant: If you qualify for civil indigence, the filing and summons fees are waived; other costs and fees are not waived.

1. **I have _____ dependents.** (Include only those persons you list on your U.S. Income tax return.)

Are you Married?...Yes....No Does your Spouse Work?...Yes....No Annual Spouse Income? \$ _____

2. **I have a take-home income of \$ _____** paid () weekly () bi-weekly () semi-monthly () monthly () yearly.

(Take-home income is your total income including salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, minus deductions required by law and other court-ordered payments such as child support.)

3. **I have \$ _____ in other income** paid () weekly () bi-weekly () semi-monthly () monthly () yearly.

(Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

Second Job	Yes \$ _____ No	Veteran's benefits	Yes \$ _____ No
Social Security benefits	Yes \$ _____ No	Worker's compensation	Yes \$ _____ No
For you	Yes \$ _____ No	Income from absent family members	Yes \$ _____ No
For child(ren)	Yes \$ _____ No	Stocks/bonds	Yes \$ _____ No
Unemployment compensation	Yes \$ _____ No	Rental income	Yes \$ _____ No
Union payments	Yes \$ _____ No	Dividends or interests	Yes \$ _____ No
Retirement/pensions	Yes \$ _____ No	Other kinds of income not on the list	Yes \$ _____ No
Trusts	Yes \$ _____ No	Gifts	Yes \$ _____ No

If you do not qualify for civil indigency and you cannot afford to pay the filing fee, you must enroll in the Clerk's Office payment plan and pay a one-time administrative fee of \$25.00. I understand that I will be required to make payments for costs to the clerk in accordance with §57.082(5), Florida Statutes, as provided by law, although I may agree to pay more if I choose to do so.

4. **I have other assets.** (Circle "Yes" and fill in the value of the property, otherwise circle "No".)

Cash	Yes \$ _____ No	Savings account	Yes \$ _____ No
Bank account(s)	Yes \$ _____ No	Stocks/bonds	Yes \$ _____ No
Certificates of deposit or money market account	Yes \$ _____ No	Homestead Real Property*	Yes \$ _____ No
Boats*	Yes \$ _____ No	Motor Vehicle*	Yes \$ _____ No
		Other assets*	Yes \$ _____ No

Check one: I () DO () DO NOT expect to receive more assets in the near future. The asset is _____.

5. **I have total liabilities and debts of \$ _____** as follows: Motor Vehicle \$ _____, Home \$ _____, Boat \$ _____, Non-homestead Real Property \$ _____, Child Support paid direct \$ _____, Credit Cards \$ _____, Medical Bills \$ _____, Cost of medicines (monthly) \$ _____, Other \$ _____.

6. **I have a private lawyer in this case** ____ Yes ____ No

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under F.S. 57.082 commits a misdemeanor of the first degree, punishable as provided in s.775.082 or s.775.083. **I attest that the information I have provided on this application is true and accurate to the best of my knowledge.**

Signed on _____, 20 ____.

Signature of Applicant for Indigent Status

Year of Birth Last four digits of Driver License or ID #

Print Full Legal Name

Email address: _____

Phone Number/s: _____

Address, Street, City, State, Zip Code

This form was completed with the assistance of _____ Clerk/Deputy Clerk/Other authorized person.

CLERK'S DETERMINATION

Based on the information in this Application, I have determined the applicant to be () **Indigent** () **Not indigent**, according to 57.082, F.S.

Dated on _____, 20 ____.



LAURA E. ROTH
CLERK OF THE CIRCUIT COURT

By: _____

APPLICANTS FOUND NOT TO BE INDIGENT MAY SEEK REVIEW BY A JUDGE BY ASKING FOR A HEARING TIME. THERE IS NO FEE FOR THIS REVIEW. Sign here if you want the judge to review the clerk's decision _____