

STATE OF FLORIDA vs.

CASE NO. _____

Defendant/Minor Child

APPLICATION FOR CRIMINAL INDIGENT STATUS

_____ I AM SEEKING THE APPOINTMENT OF THE PUBLIC DEFENDER

OR

_____ I HAVE A PRIVATE ATTORNEY OR AM SELF-REPRESENTED AND SEEK DETERMINATION OF INDIGENCE STATUS FOR COSTS

Notice to Applicant: The provision of a public defender/court appointed lawyer and costs/due process services are not free. A judgment and lien may be imposed against all real or personal property you own to pay for legal and other services provided on your behalf or on behalf of the person for whom you are making this application. There is a \$50.00 fee for each application filed.

If the application fee is not paid to the Clerk of the Court within 7 days, it will be added to any costs that may be assessed against you at the conclusion of this case. If you are a parent/guardian making this affidavit on behalf of a minor or tax-dependent adult, the information contained in this application must include your income and assets.

- I have _____ dependents. (*Do not* include children not living at home and do not include a working spouse or yourself.)
- I have a take home income of \$_____ paid () weekly () bi-weekly () semi-monthly () monthly () yearly
(Take home income equals salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, *minus* deductions required by law and other court ordered support payments)
- I have 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"*)

Social Security benefits.....	Yes \$ _____	No _____	Veterans' benefit.....	Yes \$ _____	No _____
Unemployment compensation.....	Yes \$ _____	No _____	Child support or other regular support from family members/spouse.....	Yes \$ _____	No _____
Union Funds.....	Yes \$ _____	No _____	Rental income.....	Yes \$ _____	No _____
Workers compensation.....	Yes \$ _____	No _____	Dividends or interest.....	Yes \$ _____	No _____
Retirement/pensions.....	Yes \$ _____	No _____	Other kinds of income not on the list.....	Yes \$ _____	No _____
Trusts or gifts.....	Yes \$ _____	No _____			
- I have other assets: (*Circle "yes" and fill in the value of the property, otherwise circle "No"*)

Cash.....	Yes \$ _____	No _____	Savings.....	Yes \$ _____	No _____
Bank account(s).....	Yes \$ _____	No _____	Stocks/bonds.....	Yes \$ _____	No _____
Certificates of deposit or money market accounts.....	Yes \$ _____	No _____	*Equity in Real estate (excluding homestead). Yes \$ _____	No _____	
*Equity in Boats/Other tangible property	Yes \$ _____	No _____	*Equity means value minus loans. Also list any expectancy in an interest in such property. List the address of this property:		
*Equity in Motor Vehicles.....	Yes \$ _____	No _____	Address _____		
List the year/make/model and tag #: _____			City, State, Zip _____		
			County of Residence _____		
- I have a total amount of liabilities and debts in the amount of \$ _____
- I receive: (*Circle "Yes" or "No"*)

Temporary Assistance for Needy Families-Cash Assistance.....	Yes	No
Poverty-related veterans' benefits.....	Yes	No
Supplemental Security Income (SSI).....	Yes	No

7. I have been released on bail in the amount of \$_____. Cash ___ Surety ___ Posted by: Self ___ Family ___ Other ___

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under FS 27.52 commits a misdemeanor of the first degree, punishable as provided in FS 775.082 or 775.083. I attest that the information I have provided on this Application is true and accurate.

Signed this _____ day of _____, 20____. S/ _____

 Signature or Name of Applicant for Indigent Status

Year of Birth _____

Print Full Name _____

Last four digits of Driver License or ID Number _____

 Address, P O Address, Street, City, State, Zip Code
 Phone number: _____
 Is the above address different from the address reflected on your court notice? Yes or No

NOTICE: If the applicant is determined by the Clerk to be Not Indigent, you may seek judicial review at your next scheduled court appearance.

CLERK'S DETERMINATION

_____ Based on the information in this Application, I have determined the applicant to be () Indigent () Not Indigent pursuant to s. 27.52, F.S.

_____ The Public Defender is hereby appointed to the case listed above until relieved by the Court.

Dated this _____ day of _____, 20____.



LAURA E. ROTH
Clerk of the Circuit Court

Deputy Clerk

This form was completed with the assistance of _____ Clerk/Deputy Clerk/Other authorized person.
Original: Court File Gold copy: Defendant/Child(ren) Pink copy: Public Defender