IN THE CIRCUIT/COUNTY COURT OF THE SEVENTH JUDICIAL CIRCUIT

IN AND FOR VOLUSIA COUNTY, FLORIDA

**CASE NO.**

**DIVISION**

 ,

Plaintiff/Petitioner or In the Interest of

vs.

 .

Defendant/Respondent

### APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS

Notice to Applicant: If you do not qualify for civil indigence 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.

1**. I have \_\_\_\_\_\_\_\_\_ dependents.**  (Do not include children not living at home and do not include a working spouse or yourself.)

2. **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.)

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”)

 Social Security benefits Yes $\_\_\_\_\_\_\_\_\_\_ No Veteran’s benefits Yes $\_\_\_\_\_\_\_\_\_\_\_\_\_\_No

 Unemployment compensation Yes $\_\_\_\_\_\_\_\_\_\_ No Child Support or other regular support

 Union funds Yes $\_\_\_\_\_\_\_\_\_\_ No from family members/spouse Yes $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No

 Worker’s compensation Yes $\_\_\_\_\_\_\_\_\_\_ No Rental income Yes $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No

 Retirement/pensions Yes $\_\_\_\_\_\_\_\_\_\_ No Dividends or interests Yes $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No

 Trusts or gifts Yes $\_\_\_\_\_\_\_\_\_\_ No Other kinds of income not on the list Yes $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No

 4. **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 and bonds Yes $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No

 Certificates of deposit or \*Equity in real estate (excluding

 money market account Yes $\_\_\_\_\_\_\_\_\_\_ No homestead) Yes $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No

\*Equity in Boats and other tangible \*Equity in motor vehicles Yes $ \_\_\_\_\_\_\_\_\_\_\_\_\_ No

 property Yes $\_\_\_\_\_\_\_\_\_\_ No

5**. I have total amount of liabilities and debts in the amount of** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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 this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Applicant for Indigent Status

Date of Birth Print Full Legal Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last four digits or Driver License or ID # Address, P O Address, Street, City, State, Zip Code

**Note: If applicant is determined by the clerk to be Not Indigent, you may seek judicial review by filing a petition to review.**

**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 this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

This form was completed with the assistance of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Clerk/Deputy Clerk/Other.

 Deputy Clerk