**APPLICATION FOR WAIVER OF**

**FEES/APPOINTMENT OF COUNSEL**

STATE OF CONNECTICUT

**SUPERIOR COURT**

**www.jud.ct.gov**

**To: The Superior Court**

|  |  |
| --- | --- |
| Name of applicant (Last, first, middle initial)  «name» | Address of Applicant  «address» |
| Judicial District  «district» | Telephone  «phone» |

Type of Proceeding (“X) all that apply)

Criminal Case Civil Case

Dissolution of Marriage Custody Proceeding

Housing Small Claims

Other (Specify):

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

**Fee Waiver/Appointment of Counsel**

I ask that the court order that I do not have to pay fees or costs or order the State to pay the fees and costs below. (“X” all that apply)

Entry fee (fee to file case) Filing fee (fee to file motion, etc.)

Costs of service of process (delivery of papers by state marshal or other proper officer)

Counsel fees (attorney’s fees)