



ORDER ON APPLICATION FOR WAIVER OF COURT FEES (CIVIL)

IN THE STATE OF ILLINOIS, CIRCUIT COURT

COUNTY: _____
County Where You Are Filing the Case

PLAINTIFF/PETITIONER OR IN RE: _____
Who started the case. First, Middle, and Last Name, or Business Name

DEFENDANT/RESPONDENT: _____
Who the case was filed against. First, Middle, and Last Name, or Business Name

Case Number _____

Your Name (applicant): _____
First Middle Last Name



DO NOT check any boxes or fill in any more blanks on this form. The judge will complete the rest of the form.

The Court has reviewed the *Application for Waiver of Court Fees* and orders (check 1, 2, 3, or 4):

☐ **1. GRANTED – FULL WAIVER**

The *Application for Waiver of Court Fees* is **granted**, effective on the date the *Application* was first filed. The applicant qualifies for a **full (100%) waiver** and may participate in this case without payment of fees, costs, or charges because (check A, B, or C):

☐ **A.** The applicant receives **means-based public benefits** under one or more of the following programs:

- SSI (Supplemental Security Income, not Social Security)
- AABD (Aid to the Aged, Blind and Disabled)
- TANF (Temporary Assistance to Needy Families)
- SNAP (Food Stamps)
- General Assistance (GA), Transitional Assistance, or State Children and Family Assistance

- OR -

☐ **B.** The applicant's personal income is **125% or less of the current poverty level** as established by the U.S. Dept. of Health & Human Services and the applicant's non-exempt assets under [735 ILCS 5/12-901](#) and [735 ILCS 5/12-1001](#) are such that the applicant is unable to pay the fees, costs, or charges.

- OR -

☐ **C.** Payments of fees, costs, and charges would cause **substantial hardship** for the applicant or their family.

☐ **2. GRANTED – PARTIAL WAIVER**

The *Application for Waiver of Court Fees* is granted, effective on the date the *Application* was first filed. The court finds (*check one*):

- ☐ **75%** of all fees, costs, and charges are waived. The applicant **must pay 25%** of all fees, costs, and charges because the applicant's available income is more than 125% but not greater than 150% of the current poverty level.
- ☐ **50%** of all fees, costs, and charges are waived. The applicant **must pay 50%** of all fees, costs, and charges because the applicant's available income is more than 150% but not greater than 175% (50% waiver);
- ☐ **25%** of all fees, costs, and charges are waived. The applicant must pay 75% of all fees, costs, and charges because the applicant's available income is more than 175% but not greater than 200% (25% waiver);

Income findings are based on the current poverty level as established by the U.S. Dept. of Health & Human Services, and the applicant's non-exempt assets under [735 ILCS 5/12-901](#) and [735 ILCS 5/12-1001](#) are such that the applicant is unable to pay the fees, costs, or charges.

Payment (*check one*):

☐ The applicant must pay the fees, costs, and charges currently due by: _____
Month, Day, Year

☐ Upon good cause shown, the applicant may make payments as follows (*describe deferral, installment plan, or other reasonable terms*):

☐ **3. CONTINUED – APPLICATION IS INCOMPLETE OR FACTUAL ISSUE**

If the court determines that relevant sections of the Application are incomplete or there is a factual issue regarding the applicant's entitlement to a waiver, the applicant must be notified of the deficiencies and given the opportunity to amend the Application and/or be given a remote hearing in accordance with Illinois Supreme Court Rule [45](#), unless the applicant requests an in-person hearing or will already be present in the courthouse on the date of the hearing.

Relevant sections of the *Application* are incomplete or there is a factual issue about the applicant's eligibility for a fee waiver on the face of the *Application*.

The specific eligibility questions are:

The applicant must (*check all that apply*):

- ☐ **A. File an updated (amended) Application** that includes the missing information listed above.

☐ **B. Attend a court date.**

*If a hearing is set, it must be set within **30 days** of the date the Application was filed ([735 ILCS 5/5-105](#) and [5/5-105.5](#); Illinois Supreme Court Rule [298](#)).*

The Application for Waiver of Court Fees is **scheduled for court** on (check all that apply):

Date: _____
Month, Day, Year

Time: _____
Include AM or PM

☐ **Remotely** (video or telephone option)

By video conference at: _____
Video conference website

Video conference log-in information, meeting ID, password, etc.

By telephone at: _____
Call-in number for telephone remote appearance

☐ **In person** at: _____
Courtroom Address Courtroom Number

If remote and in-person options are both checked, you may choose either option.

☐ **C. Provide documents.** These documents will **not** be included in the public court file.

☐ Provide documents at the hearing.

☐ Submit documents before the hearing. Instructions about when and how to submit:

Required documents are:

☐ **4. DENIED - DOES NOT QUALIFY**

The Application for Waiver of Court Fees is **denied**. The applicant does not qualify for a fee waiver because (must state specific reason):

The applicant must pay all the fees, costs, and charges currently due by:

Month, Day, Year



If Application was granted, this order expires one year from the date of this order. The applicant may reapply before or after the expiration date. Fees, costs, and charges included in this waiver are: filing, service of process, publication, mediation, guardian ad litem, and all other fees listed in [735 ILCS 5/5-105\(a\)\(2\)\(i\)](#).

ENTERED:

Judge

Date (Month, Day, Year)