FW-012 — Order on Court Fee Waiver After Reconsideration Hearing (Superior Court)

Clerk stamps date here when form is filed.

(1) Name of person who asked the court to waive court fees:

_____

Street or mailing address: _____

City: _____ State: _____ Zip: _____

(2) Lawyer, if person in (1) has one: *(name, firm name, address, phone number, e-mail, and State Bar number):*

_____

_____

_____

_____

_____

_____

Fill in court name and street address:

Superior Court of California, County of

(3) The court made a previous fee waiver order in this case on *(date):*

_____

(4) The court sent you a notice to go to court about your fee waiver on *(date):*

_____

Court fills in case number when form is filed.

Case Number:

Case Name:

(5) There was a hearing on *(date):* _____

at *(time):* _____ in *(Department):* _____

The following people were at the hearing *(check all that apply):*

☐ Person in (1)   ☐ Lawyer in (2)

☐ Others *(names):* _____

_____

_____

☐ Additional persons present listed on Attachment 5.

Read this form carefully. All checked ▶ boxes are court orders.

(6) After considering the information provided at the hearing, **the court makes the following orders:**

a. ☐ **No Change to Fee Waiver.** The *Order on Court Fee Waiver* issued by this court on *(date):* _____ remains in effect. No change is made at this time.

b. ☐ **Fee Waiver Is Ended as of:** *(date):* _____ . The court finds that beginning on that date you were no longer eligible for a fee waiver for the reasons stated: ☐ Below   ☐ On Attachment 6b

_____

_____

_____

_____

_____

(1) ☐ You must pay all court fees in this case from the date of this order.

(2) ☐ You must also pay the court $_____ for fees that were initially waived after you were no longer eligible.

    (a) ☐ You must pay that amount within 10 days of this order.

    (b) ☐ You may pay that amount in monthly payments of $_____ beginning *(date):* _____ and payable on the 1st of each month after that until paid in full.

6 c. ☐ **Fee Waiver Is Retroactively Withdrawn.** The court finds that you were never entitled to a fee waiver in this case for the reasons stated: ☐ Below ☐ On Attachment 6c

_____
_____
_____
_____
_____

    (1) You must pay all court fees in this case from the date of this order.

    (2) ☐ You must also pay the court $_____ for fees that the court initially waived.

        (a) ☐ You must pay that amount within 10 days of this order.

        (b) ☐ You may pay that amount in monthly payments of $_____ beginning *(date):*_____ and payable on the 1st of each month after that until paid in full.

d. ☐ **Fee Waiver Is Modified.** The court finds that you obtained the initial fee waiver in bad faith, for an improper purpose, or to needlessly increase the costs of litigation. The court places the following limitations on the fee waiver that was granted to you:

    (1) ☐ You must pay all court fees in this case from the date of this order.

    (2) ☐ From the date of this order, only the following court fees will be waived *(court to check all that apply).*

        You must pay for all court fees that are not checked below:

        ☐ Filing papers at superior court   ☐ Making certified copies   ☐ Giving notice and certificates

        ☐ Sheriff's fee to give notice   ☐ Sending papers to another court department

        ☐ Court-appointed interpreter fees for a witness

        ☐ Reporter's fee for attendance at hearing or trial, if the court is not electronically recording the proceeding and you request that the court provide an official reporter

        ☐ Jury fees and expenses   ☐ Fees for a peace officer to testify in court

        ☐ Court-appointed expert's fees   ☐ Court fees for telephone hearings

        ☐ Other fees *(specify):* _____

    (3) ☐ Other modifications as ordered: ☐ Below   ☐ On Attachment 6d(3)

_____
_____
_____
_____

e. ☐ **Other Orders as stated:** ☐ Below   ☐ On Attachment 6e

_____
_____
_____
_____

Date: _____   ▶ _____

                                        Signature of Judge or Judicial Officer

Clerk's Certificate of Service

I certify that I am not involved in this case and *(check one):*

☐ I handed a copy of this order to the party and attorney, if any, listed in ① and ②, at the court, on the date below.

☐ This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in ① and ②, from *(city):* _____, California, on the date below.

    ☐ A certificate of mailing is attached.

Date: _____

Clerk, by _____ , Deputy

Name: _____