WAIVER OF COURT FEES AND COSTS

THE LAW DOES NOT ALLOW PERSONNEL OF THE OFFICE OF THE CLERK OF THE SUPERIOR COURT TO ASSIST IN THE SELECTION OR PREPARATION OF ANY FORMS OR TO ADVISE YOU AS TO ANY PROCEDURE TO BE FOLLOWED IN OBTAINING A JUDGMENT

Attached are the forms usually necessary to commence an action for Waiver of Court Fees and Costs.

Form #	Title	Number of Copies
FW-001 Info	Information Sheet on Waiver of Court Fees and Costs	1
FW-001	Application for Waiver of Court Fees and Costs	1
FW-003	Order on Application for Waiver of Court Fees and Costs	1
FW-010	Notice to Court of Improved Financial Situation or Settleme	nt 1
CIV-110	Request for Dismissal	1

ALL FORMS MUST BE TYPED OR LEGIBLY PRINTED IN BLACK INK AND SIGNED.

Complete all forms in their entirety, i.e., all boxes checked as applicable; attachments attached, if applicable; and "NONE", "NOT APPLICABLE", or "UNKNOWN" typed in if required.

INFORMATION SHEET ON WAIVER OF SUPERIOR COURT FEES AND COSTS

If you have been sued or if you wish to sue someone, or if you are filing or have received a family law petition, and if you cannot afford to pay court fees and costs, you may not have to pay them in order to go to court. If you are getting public benefits, are a low-income person, or do not have enough income to pay for your household's basic needs and your court fees, you may ask the court to waive all or part of your court fees.

- 1. To make a request to the court to waive your fees in superior court, complete the Request to Waive Court Fees (form FW-001). If you qualify, the court will waive all or part of its fees for the following:
 - Filing papers in superior court (other than for an appeal in a case with a value of over \$25,000)
 - Making and certifying copies
 - Sheriff's fee to give notice
 - Court fees for telephone hearings
- Giving notice and certificates
- Sending papers to another court department
- Having a court-appointed interpreter in small claims court • Reporter's daily fee (for up to 60 days after the grant of the fee waiver, at the court-approved daily rate)
- Preparing, certifying, copying, and sending the clerk's transcript on appeal.
- 2. You may ask the court to waive other court fees during your case in superior court as well. To do that, complete a Request to Waive Additional Court Fees (Superior Court) (form FW-002). The court will consider waiving fees for items such as the following, or other court services you need for your case:
 - Jury fees and expenses
 - Fees for court-appointed experts
 - Reporter's daily fees (beyond the 60-day period after the grant of the fee waiver, at the court-approved daily rate)
- Fees for a peace officer to testify in court
- Court-appointed interpreter fees for a witness
 - Other necessary court fees
- 3. If you want the Appellate Division of Superior Court or the Court of Appeal to review an order or judgment against you and you want the court fees waived, ask for and follow the instructions on Information Sheet on Waiver of Appellate Court Fees, Supreme Court, Court of Appeal, Appellate Division (form APP-015/FW-015-INFO).

IMPORTANT INFORMATION!

- You are signing your request under penalty of perjury. Please answer truthfully, accurately, and completely.
- The court may ask you for information and evidence. You may be ordered to go to court to answer questions about your ability to pay court fees and costs and to provide proof of eligibility. Any initial fee waiver you are granted may be ended if you do not go to court when asked. You may be ordered to repay amounts that were waived if the court finds you were not eligible for the fee waiver.
- If you receive a fee waiver, you must tell the court if there is a change in your finances. You must tell the court within five days if your finances improve or if you become able to pay court fees or costs during this case. (File Notice to Court of Improved Financial Situation or Settlement (form FW-010) with the court.) You may be ordered to repay any amounts that were waived after your eligibility came to an end.
- If you receive a judgment or support order in a family law matter: You may be ordered to pay all or part of your waived fees and costs if the court finds your circumstances have changed so that you can afford to pay. You will have the opportunity to ask the court for a hearing if the court makes such a decision.
- If you win your case in the trial court: In most circumstances the other side will be ordered to pay your waived fees and costs to the court. The court will not enter a satisfaction of judgment until the court is paid. (This does not apply in unlawful detainer cases. Special rules apply in family law cases. (Government Code, section 68637(d), (e).)
- If you settle your civil case for \$10,000 or more: Any trial court waived fees and costs must first be paid to the court out of the settlement. The court will have a lien on the settlement in the amount of the waived fees and costs. The court may refuse to dismiss the case until the lien is satisfied. A request to dismiss the case (use form CIV-110) must have a declaration under penalty of perjury that the waived fees and costs have been paid. Special rules apply to family law cases.
- The court can collect fees and costs due to the court. If waived fees and costs are ordered paid to the trial court, the court can start collection proceedings and add a \$25 fee plus any additional costs of collection to the other fees and costs owed to the court.
- The fee waiver ends. The fee waiver expires 60 days after the judgment, dismissal, or other final disposition of the case or earlier if a court finds that you are not eligible for a fee waiver.
- If you are in jail or state prison: Prisoners may be required to pay the full cost of the filing fee in the trial court but may be allowed to do so over time.

FW-001 Request to Waive Court Fees					CON	NFIDENTIAL	
If you are getting public benefits, are a low-income person, or do not have enough income to pay for household's basic needs and your court fees, you may use this form to ask the court to waive all or part of your court fees. The court may order you to answer questions about your finances. If the court waives the fees, you may still have to pay later if: • You cannot give the court proof of your eligibility, • Your financial situation improves during this case, or • You settle your civil case for \$10,000 or more. The trial court that waives your fees will have a lien on any such settlement in the amount of the waived			Fill in court name an	date here when form is filed. d street address:			
		ourt may also ch I (<i>person askin</i> g					
		dress:				Fill in case number	and name:
				Zip:		Case Number:	
						<u> </u>	
\sim		nave one (job tit				Case Name:	
\sim .		:					
(3) Your I	awyer, if yo	ou have one (na	me, firm or a	ffiliation, addre	ess, phone n	umber, and Stat	e Bar number):
If you hear hear St. □	court's fee court's fee aperior Court apreme Court appellate Court appellate Court are you ask a receive (cha Assistance for My gross mo	in why you are a s or costs are t (See Informati t, Court of Apport Fees and Cost ing the court eck all that apport IHSS (In-Ho or Needy Famili	egal-aid type asking the cone you asking the cone you asking for Sheet on Weal, or Appellets (form APP to waive you ly): Mediane Supportivities) CAP dincome (betal	services based art to waive the g to be waive Vaiver of Super ate Division of 2-015/FW-015-Dur court feed 1-Cal Food we Services) I (Cash Assistatore deductions	e fees. ed? rior Court F Superior Court	SSI SSP Sor Tribal TAI	ay have to go to a Form FW-001-INFO).) nation Sheet on Waiver of County Relief/General NF (Tribal Temporary and and Disabled) mount listed below.
	Family Size	Family Income	Family Size	Family Income	Family Size	Family Income	If mone than 6 moonle
	1	\$1,163.55	3	\$1,988.55	5	\$2,813.55	If more than 6 people at home, add \$412.50
	2	\$1,576.05	4	\$2,401.05	6	\$3,226.05	for each extra person.
((check one):	☐ waive all co	ourt fees	waive some of	the court fee	es 🛘 let me ma	ees. I ask the court to ake payments over time a must fill out page 2.)
(6) □ C	neck here if	you asked the co	ourt to waive	your court fees	for this cas	e in the last six	months.
I declare un on this form	f your previonder penaltyn and all att	us request is re	asonably ava der the laws ue and corre	ilable, please a of the State of	ttach it to th	nis form and che	
				•			
Print y	our name he	ere		Si	gn here		

	Case Numb	er:	
Your name:			
If you checked 5a on page 1, do not fill out below. If you chec you must fill out this entire page. If you need more space, att Financial Information and your name and case number at th	tach form MC-025 or attach a sh		
Check here if your income changes a lot from month to month. Fill out below based on your average income for the past 12	Your Money and Property		\$
months. 8 Your Monthly Income	b. All financial accounts (List ba	nk name and amoui	
a. Gross monthly income (before deductions): List each payroll deduction and amount below:	(2)		\$
(1)\$	(3)		\$ \$
(2) \$ \$ \$			Ť
(4)	c. Cars, boats, and other vehicle Make / Year	Fair Market	How Much Yo Still Owe
b. Total deductions (add 8a (1)-(4) above): \$ C. Total monthly take-home pay (8a minus 8b): \$	(1)(2)(3)	\$	\$
d. List the source and amount of <u>any</u> other income you get each month, including: spousal/child support, retirement, social	(3)	\$	\$
security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income,	d. Real estate Address	Fair Market Value	How Much You Still Owe
reimbursement for job-related expenses, gambling or lottery	(1)(2)		\$
winnings, etc. (1) \$	(2)(3)	\$	\$
· ·	e. Other personal property (jewe	·	
(2)	stocks, bonds, etc.):	Fair Market	How Much You
	Describe (1)	Value \$	Still Owe \$
e. Your total monthly income is (8c plus 8d): \$	(1) (2) (3)	\$	\$
9 Household Income	(3)	\$	\$
a. List all other persons living in your home and their income; include only your spouse and all individuals who depend in whole or in part on you for support, or on whom you depend in whole or in part for support. Gross Monthly	Your Monthly Expenses (Do not include payroll deductions you a. Rent or house payment & r b. Food and household suppl	ou already listed in 8b.) maintenance	\$ \$
Name Age Relationship Income (1)	c. Utilities and telephone		\$
(1)	d. Clothinge. Laundry and cleaning		\$
(3)	f. Medical and dental expens		\$
(4) \$	g. Insurance (life, health, accih. School, child care	ident, etc.)	\$
b. Total monthly income of persons above: \$	 Child, spousal support (and 		\$
Total monthly income and household income (8e plus 9b): \$	j. Transportation, gas, auto rk. Installment payments (list ePaid to:		
	(1)		\$
To list any other facts you want the court to know, such as	(2)(3)		\$
unusual medical expenses, family emergencies, etc., attach form MC-025. Or attach a sheet of paper, and write	I. Wages/earnings withheld b	y court order	\$
Financial Information and your name and case number at the top. Check here if you attach another page.	m. Any other monthly expense Paid to:	es (list each below).	How Much?
Important! If your financial situation or ability to pay	(1)(2)		\$
court fees improves, you must notify the court within five days on form FW-010.	(3)		\$

Total monthly expenses (add 11a –11m above): \$

FW-003 Order on Court Fee Waiver (Superior Court)	Clerk stamps date here when form is filed.
Person who asked the court to waive court fees: Name:	
Street or mailing address:	
City: State: Zip:	
2 Lawyer, if person in 1 has one (name, address, phone e-mail, and State Bar number):	
	Fill in court name and street address:
	Superior Court of California, County of
A request to waive court fees was filed on (date):	
☐ The court made a previous fee waiver order in this case	
on (date):	Fill in case number and case name:
	Case Number:
Read this form carefully. All checked boxes $oxtimes$ are court orde	Case Name:
4 After reviewing your (check one): Request to Waive Cour the court makes the following orders:	t Fees Request to Waive Additional Court Fees
a. The court grants your request, as follows:	
(1) Fee Waiver. The court grants your request and waives <i>Court, rule 3.55.</i>) You do not have to pay the court fees	
• Filing papers in Superior Court	 Giving notice and certificates
Making copies and certifying copiesSheriff 's fee to give notice	Sending papers to another court departmentCourt-appointed interpreter in small claims court
 Reporter's daily fee (for up to 60 days following the feether) Preparing and certifying the clerk's transcript on appears 	ee waiver order at the court-approved daily rate)
(2) Additional Fee Waiver. The court grants your request costs that are checked below. (Cal. Rules of Court, rul	*
*	Fees for a peace officer to testify in court
☐ Fees for court-appointed experts ☐	Court-appointed interpreter fees for a witness
☐ Reporter's daily fees (beyond the 60-day period follow):	
(3) Fee Waiver for Appeal. The court grants your request	
appeal. (Cal. Rules of Court, rules 3.55, 3.56, 8.26, and	· · · · · · · · · · · · · · · · · · ·
Preparing and certifying clerk's transcript for appeal	— ·
Other (specify):	

		Case Number:	
our name:			
b. The court denies your requ	est, as follows:		
	eadline below, the court cannot process request. If the papers were a notice of a		
this order (see date below) • Pay your fees and of	•		
	request because the information you iver you requested (specify reasons)		
FW-006. You have 10 • Pay your fees and of	a blank Request for Hearing About days after the clerk gives notice of costs, or n order to show the court more info	this order (see date below) to:	
below. The hearing will be	mation to decide whether to grant yearbout (specify questions regarding croof to support your request if reasons)	eligibility):	
Hearing Date:	Na	ume and address of court if differ	rent from page 1:
Dept.:			
waive court fees, and you will	l, and you do not go to court on your he have 10 days to pay your fees. If you n n your request. If the papers were a not	niss that deadline, the court cannot	process
Date	Signature of (check one): \square Judicial Officer \square Cle	rk, Deputy
language interpreter service	tions. Assistive listening systems, coses are available if you ask at least 5 commodation, Form MC-410. (Civil	computer-assisted real-time caption of days before your hearing. Cont	ioning, or sign
	Clerk's Certificate of So		
certify that I am not involved in the I handed a copy of this order to t		rtificate of mailing is attached.	a data kalan
= ·	postage paid, to the party and attorney		
from (city):	, California on the	date below.	a m · mu · ,
Poto:	Clerk	by	Denuty

This is a Court Order.

FW-010 CONFIDENTIAL **Financial Situation or Settlement** Clerk stamps date here when form is filed. **Your Information** (person with a fee waiver): Street or mailing address: City: _____ State: ____ Zip: ____ Phone number: **Your lawyer,** if you have one (name, address, phone number, e-mail, 2 and State Bar number: Fill out court name and street address: Superior Court of California, County of Date of your **last** court fee waiver order in this case: (date) Fill out case number and case name: Case Number: Case Name: **Notice:** The court may order you to answer questions about your finances and later order you to pay back the waived fees. If this happens and you do not pay, the court can make you pay the fees and also charge you collection fees. If there is a change in your financial circumstances during this case that increases your ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010.) If you win your case, the trial court may order the other side to pay the fees. If you settle your civil case for \$10,000 or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid. 4) My financial situation has changed since the date of the last court fee waiver order in a way that improves my ability to pay fees. I ask the court to do one of the following: a. \square **End** my fee waiver because my financial situation has improved and I am able to pay my court fees and costs that are due after (date): b. Review my updated financial information in the attached Request to Waive Court Fees. I believe I am still eligible for a fee waiver. (Complete form FW-001 and attach to this form.) **5**) \square My case has settled for (*check one*) \square less than \$10,000 \square \$10,000 or more (*if so, complete a and b below.*) a. I (check one) have have not received the proceeds of the settlement. b. The name and address of the party who has agreed to pay the settlement: I declare under penalty of perjury under the laws of the State of California that the information above is true and correct. Date: Sign here Print your name here

Notice to Court of Improved

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		FOR COURT USE ONLY
		FOR COURT USE ONLY
TELEPHONE NO.:		
FAX NO. (Optional): E-MAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:		
REQUEST FOR DISMISSAL		
Personal Injury, Property Damage, or Wrongful Death		CASE NUMBER:
Motor Vehicle Other		
Family Law Eminent Domain		
Other (specify):		
- A conformed copy will not be returned by the clerk unl	ess a method of return	is provided with the document
TO THE CLERK: Please dismiss this action as follows: a. (1) With prejudice (2) Without prejudice		
b. (1) Complaint (2) Petition (3) Cross-complaint filed by <i>(name)</i> :		on (date):
(4) Cross-complaint filed by <i>(name)</i> :		on (date):
		on (date).
· · · · · · · · · · · · · · · · · · ·		
(6) Other (specify):*		
2. (Complete in all cases except family law cases.)		
Court fees and costs were waived for a party in this c	· ·	ay be obtained from the clerk. If this box is
checked, the declaration on the back of this form must Date:	t be completed).	
Date.		
	/	
(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY) *If dismissal requested is of specified parties only of specified causes of action	Attorney or party withou	(SIGNATURE)
only, or of specified cross-complaints only, so state and identify the parties, causes of action, or cross-complaints to be dismissed.	Plaintiff/Petition	
	Cross-Complain	•
3. TO THE CLERK: Consent to the above dismissal is hereby give	en.**	
Date:		
(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)	·	(SIGNATURE)
** If a cross-complaint – or Response (Family Law) seeking affirmative	Attorney or party without	ut attorney for:
relief – is on file, the attorney for cross-complainant (respondent) must sign this consent if required by Code of Civil Procedure section 581 (i)	Plaintiff/Petition	
or (j).	Cross-Complain	nant
(To be completed by clerk)		
4. Dismissal entered as requested on (date):5 Dismissal entered on (date):	as to only (name):	
6. Dismissal not entered as requested for the following re	, , ,	
o	(-13).	
7. a. Attorney or party without attorney notified on (date):		
b. Attorney or party without attorney not notified. Filing		
a copy to be conformed means to retur	n conformed copy	
Date: Clerk	. bv	Deputy

C	ı١	1_1	1 1	n

PLAINTIFF/PETITIONER:	CASE NUMBER:
DEFENDANT/RESPONDENT:	
Declaration Concerning Waived Court Fe	ees
The court has a statutory lien for waived fees and costs on any recovery of \$10,00 settlement, compromise, arbitration award, mediation settlement, or other recover be paid before the court will dismiss the case.	· •
The court waived fees and costs in this action for (name):	
 2. The person in item 1 (check one): a is not recovering anything of value by this action. b is recovering less than \$10,000 in value by this action. c is recovering \$10,000 or more in value by this action. (If item 2c is checked, 	item 3 must be completed.)
3. All court fees and costs that were waived in this action have been paid to the court	rt (check one): Yes No
I declare under penalty of perjury under the laws of the State of California that the information Date:	n above is true and correct.
(TYPE OR PRINT NAME OF ATTORNEY PARTY MAKING DECLARATION)	(SIGNATURE)