SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN DIEGO

FEE WAIVER PACKET



| FORMS INCLUDED IN THIS I | PACKET |
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| Information Sheet on Waiver of Superior Court Fees and Costs | Judicial Council Form #FW-001-INFO |
| Request to Waive Court Fees | Judicial Council Form #FW-001 |
| Request to Waive Additional Court Fees (Superior Court) | Judicial Council Form #FW-002 |
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| Notice to Court of Improved Financial Situation or Settlement | Judicial Council Form #FW-010 |

INFORMATION SHEET ON WAIVER OF SUPERIOR COURT FEES AND COSTS

If you have been sued or if you wish to sue someone, if you are filing or have received a family law petition, or if you are asking the court to appoint a guardian for a minor or a conservator for an adult or are an appointed guardian or conservator, and if you (or your ward or conservatee) cannot afford to pay court fees and costs, you may not have to pay them in order to go to court. If you (or your ward or conservatee) are getting public benefits, are a low-income person, or do not have enough income to pay for your (or his or her) household's basic needs and your court fees, you may ask the court to waive all or part of those 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) or, if you are petitioning for the appointment of a guardian or conservator or are an appointed guardian or conservator, complete the *Request to Waive Court Fees (Ward or Conservatee)* (form FW-001-GC). 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 \$35,000)
 - Making and certifying copies
- Giving notice and certificates

• Sheriff's fee to give notice

- Sending papers to another court department
- Court fee for telephone hearing
- 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 (use form FW-020 to ask for a court reporter)
- Assessment for court investigations under Probate Code section 1513, 1826, or 1851
- Preparing, certifying, copying, and sending the clerk's transcript on appeal
- Holding in trust the deposit for a reporter's transcript on appeal under Cal. Rules of Court, rule 8.833 or 8.834
- Making a transcript or copy of an official electronic recording under Cal. Rules of Court, rule 8.835
- 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) or *Request to Waive Additional Court Fees (Superior Court)* (*Ward or Conservatee*) (form FW-002-GC). 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

- 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 the 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. 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, or the ability of your ward or conservatee, to pay court fees and costs and to provide proof of eligibility. Any initial fee waiver you or your ward or conservatee are granted may be ended if you do not go to court when asked. You or your ward's or conservatee's estate may be ordered to repay amounts that were waived if the court finds you were not eligible for the fee waiver.
- **Public benefits programs listed on the application form.** In item 5 on the Request to Waive Court Fees (item 8 of the Request to Waive Court Fees (Ward or Conservatee)), there is a list of programs from which you (or your ward or conservatee) may be receiving benefits, listed by the abbreviations they are commonly known by. The full names of those programs can be found in Government Code section 68632(a), and are also listed here:
 - Medi-Cal
 - Food Stamps-California Food Assistance Program, CalFresh Program, or SNAP
 - SSP—State Supplemental Payment
 - Supp. Sec. Inc.—Supplemental Security Income (<u>not</u> Social Security) (*list continues on next page*)

- County Relief/Gen. Assist.—County Relief, General Relief (GR), or General Assistance (GA)
- IHSS—In-Home Supportive Services
- CalWORKs-California Work Opportunity and Responsibility to Kids Act
- Tribal TANF—Tribal Temporary Assistance for Needy Families
- CAPI-Cash Assistance Program for Aged, Blind, or Disabled Legal Immigrants
- WIC-Special Supplemental Nutrition Program for Women, Infants, and Children
- Unemployment—unemployment compensation
- If you receive a fee waiver, you must tell the court if there is a change in your finances, or the finances of your ward or conservatee. You must tell the court within five days if those finances improve or if you, or your ward or conservatee, become able to pay court fees or costs during this case. (File *Notice to Court of Improved Financial Situation or Settlement* (form FW-010) or *Notice to Court of Improved Financial Situation or Settlement (Ward or Conservatee)* (form FW-010-GC) with the court.) You may be ordered to repay any amounts that were waived after your eligibility, or the eligibility of your ward or conservatee, 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 and in guardianships and conservatorships. (Gov. Code, § 68637(d), (e); Cal. Rules of Court, rule 7.5.).
- 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 the court. If waived fees and costs are ordered paid to the trial court, or if you fail to make the payments over time, 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 or your ward or conservatee are not eligible for a fee waiver. If the case is a guardianship or conservatorship proceeding, see California Rules of Court, rule 7.5(k) for information on the final disposition of that matter.
- 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. See Government Code section 68635.
- If you want a record made of your court hearing or trial: There are various reasons why you may want a record of the hearing or trial. Among other reasons, you may want to have a record for an appeal if you disagree with a court order or judgment. If you receive a fee waiver and if the court is not electronically recording the proceeding, you may ask the court to have an official court reporter attend your hearing or trial at no cost to you, so there can be a record of the proceeding. Use San Diego Superior Court local form *Request for Court Reporter by a Party With a Fee Waiver* (SDSC Form #ADM-379) to make the request, which you should file at least 10 calendar days before a scheduled court date, or as soon as you can if the court date is set with less than 10-days' notice.

If you want a written transcript after the hearing or trial, you will need to pay the court reporter separately, or arrange to get the transcript in another way. To learn about ways to do that, talk with the court's Self Help Center or read the information about appeals on the self-help webpages at <u>https://courts.ca.gov/selfhelp-appeals.htm.</u>

| FW-001 | Request to | Waive C | ourt Fees | | CONF | IDENTIAL |
|--|--|---|---|---|--|--|
| If you are getting public enough income to pay may use this form to as you to answer question may still have to pay la | for your household sk the court to waive as about your finance ater if: | 's basic needs e your court f es. If the cour | and your court ees. The court r rt waives the fee | fees, you nay order | Clerk stamps date he | ere when form is filed. |
| •You cannot give t | he court proof of yo | ur eligibility, | | | Fill in court name and | street address: |
| your fees will hav | uation improves dur vil case for \$10,000 re a lien on any such sosts. The court may | or more. The settlement in | e trial court that n the amount of | the | Superior Court of Ca | lifornia, County of San Diego |
| Name: | ion (person asking | | • | | | |
| Street or mailing | address: | Ctata | 7: | | Fill in case number ar | nd name: |
| Phone: | | | | , | Case Number: | |
| (2) Your Job, if yo Name of employ Employer's addr | u have one <i>(job title</i> er: | 2): | | | Case Name: | |
| b. (If yes, your lify our lawyer hearing to experiment to exper | as agreed to advance lawyer must sign he r is not providing le plain why you are a ees or costs are art (See Information art, Court of Appeal urt Fees (form APP | re) Lawyer's ggal-aid type is sking the cour you asking Sheet on Wa , or Appellate | signature: services based of to waive the to be waived iver of Superior Division of Su | on your lov fees. ? Court Fee | v income, you may es and Costs (form | v have to go to a |
| a. I receive Food Sta | sking the court t (check all that appl mps Supp. Sec. KS or Tribal TANE | <i>y; see form F</i> Inc. SSI | W-001-INFO fo | or definition | , | ssist. 🗌 IHSS |
| b. 🗌 My gross | | l income (bef | ore deductions | for taxes) i | 1 2 | ount listed below. (If |
| Family S | | Family Size | Family Income | Family Siz | e Family Income | If more than 6 people |
| 1 | \$2,608.33 | 3 | \$4,441.67 | 5 | \$6,275.00 | at home, add \$916.67 |
| 2 | \$3,525.00 | 4 | \$5,358.33 | 6 | \$7,191.67 | for each extra person. |
| (check or □ waive (6) □ Check here i | ne and you <u>must</u> fill all court fees and c f you asked the cou | <i>out page 2):</i> costs | aive some of the | e court fees or this case | $ = \Box $ let me main the last six motion in the last six motion. | s. I ask the court to: ke payments over time nths. |
| I declare under penal | | r the laws of | the State of Ca | | • | |
| on this form and all a Date: | ttachments is true | and correct. | • | | | |
| | Duint wour have a lar | 20 | / | n here | | |
| 1 | Print your name her | ¢ | SIE | in nere | | |

If you checked 5a on page 1, do not fill out below. If you checked 5b, fill out questions 7, 8, and 9 only. If you checked 5c, you **must** fill out this entire page. If you need more space, attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top.

| \frown $-$ | |
|--------------|--|
| 7) | Check here if your income changes a lot from month to month. |
| | If it does, complete the form based on your average income for the past 12 months. |
| | |

) Your Gross Monthly Income

a. List the source and amount of *any* income you get each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

| (1) | \$ |
|-----|----|
| (2) | \$ |
| (3) | \$ |
| (4) | \$ |
| X | ¢ |

b. Your total monthly income:

9) Household Income

a. List the income of all other persons living in your home 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 |
|------|-----|--------------|---------------|
| Name | Age | Relationship | Income |
| (1) | | | \$ |
| (2) | | | \$ |
| (3) | | | \$ |
| (4) | | | \$ |
| | | | |

\$

b. Total monthly income of persons above: \$

Total monthly income and

household income (8b plus 9b):

To list any other facts you want the court to know, such as unusual medical expenses, etc., attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top.

Check here if you attach another page.

Important! If your financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010.

10 Your Money and Property

a. Cash

| b. | All financial accounts (List bar | k name and | amount): |
|----|----------------------------------|------------------------|--|
| | (1) | | \$ |
| | (2) | | \$ |
| | (3) | | \$ |
| c. | Cars, boats, and other vehicle | | |
| | Make / Year (1) | Fair Ma Value \$ | rket How Much You Still Owe \$\$ |
| | (2) | \$ | |
| | (3) | \$ | \$ |
| d. | Real estate | Fair Ma | rket How Much Yo |
| | Address | Value | Still Owe |
| | (1) | \$ | \$ |
| | (2) | \$ | \$ |

\$

e. Other personal property (jewelry, furniture, furs,

| stocks, bonds, etc.): | Fair Market | How Much You |
|-----------------------|-------------|--------------|
| Describe | Value | Still Owe |
| (1) | _\$ | \$ |
| (2) | \$ | _\$ |

1) Your Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

| | (1) 5 | \$ |
|----|---|-----------|
| | | \$ |
| | (3) 5 | \$ |
| | (4) 5 | \$ |
| b. | Rent or house payment & maintenance | \$ |
| C. | Food and household supplies | \$ |
| d. | Utilities and telephone | \$ |
| e. | Clothing | \$ |
| f. | Laundry and cleaning | \$ |
| g. | Medical and dental expenses | \$ |
| h. | Insurance (life, health, accident, etc.) | \$ |
| i. | School, child care | \$ |
| j. | Child, spousal support (another marriage) | \$ |
| k. | Transportation, gas, auto repair and insurance | |
| Ι. | Installment payments <i>(list each below)</i> : Paid to: | |
| | (1) | _ \$ |
| | (2) | \$ |
| | (3) | \$ |
| m. | Wages/earnings withheld by court order | \$ |
| n. | Any other monthly expenses (list each below) | |
| | Paid to: | How Much? |
| | (1) | _ \$ |
| | (2) | \$ |
| | (3) | \$ |
| | onthly expenses (add 11a - 11n above): | ¢ |

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

| FW-002 Request to Waive Additional Court Fees (Superior Court) | CONFIDENTIAL |
|---|--|
| This form asks the court to waive <i>additional</i> court fees that are not covered in a current order. If you have not already received an order that waived or reduced your court fees, you must complete and file a <i>Request to Waive Court Fees (Superior Court)</i> , form FW-001, along with this form. Your Information (person asking the court to waive the fees): | Clerk stamps date here when form is filed. |
| Name: | Fill in court name and street address: |
| Street or mailing address: | Superior Court of California, County of San Diego |
| City: State: Zip: | - |
| Phone number: | |
| 2 Your lawyer, if you have one (name, firm or affiliation, address, phone number, and State Bar number): | |
| | Fill in case number and name: |
| | Case Number: |
| a. The lawyer has agreed to advance all or a portion of your fees or costs <i>(check one)</i> : Yes No | Case Name: |
| b. (If yes, your lawyer must sign here): Lawyer's signature: | |
| If your lawyer is not providing legal-aid type services based on your l hearing to explain why you are asking the court to waive the fees. | ow income, you may have to go to a |
| (3) Date your <i>last</i> court fee waiver order, if any, was granted: | |
| 4 Has your financial situation improved since your last <i>Request to Waive C</i> (<i>If yes, you must fill out a new</i> Request to Waive Court Fees, <i>form FW-00</i> | |
| (5) What other fees do you want your court fee waiver order to cover? (Chec | |
| a. Jury fees and expenses | |
| b. Court-appointed interpreter fees for a witness | |
| c. E Fees for a peace officer to testify in court | |
| d. 🗌 Fees for court-appointed experts | |
| e. D Other (specify): | |
| 6 Why do you need these other services? <i>(Explain):</i> | |
| \sim | |

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.

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date:

Print your name here

Sign here

| FW-003 (Superior Court) | Clerk stamps date here when form is filed. |
|---|--|
| 1 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, firm name, address, phone number, e -mail, and State Bar number): | |
| | Fill in court name and street address: Superior Court of California, County of San Diego |
| | – Fill in case number and name: |
| A request to waive court fees was filed on <i>(date)</i>: The court made a previous fee waiver order in this case on <i>(date)</i>. | Case Number: |
| Read this form carefully. All checked boxes ⊠ are court orders. | — Case Name: |
| Notice: The court may order you to answer questions about your finances an | s and also charge you collection fees. If there |
| fees. If this happens and you do not pay, the court can make you pay the fee is a change in your financial circumstances during this case that increases yo notify the trial court within five days. (Use form FW-010.) If you win your of to pay the fees. If you settle your civil case for \$10,000 or more, the trial court amount of the waived fees. The trial court may not dismiss the case until the 4 After reviewing your: \Box Request to Waive Court Fees | case, the trial court may order the other side urt will have a lien on the settlement in the |
| fees. If this happens and you do not pay, the court can make you pay the fee is a change in your financial circumstances during this case that increases yo notify the trial court within five days. (Use form FW-010.) If you win your of to pay the fees. If you settle your civil case for \$10,000 or more, the trial court amount of the waived fees. The trial court may not dismiss the case until the | case, the trial court may order the other side art will have a lien on the settlement in the lien is paid. |

(2) Additional Fee Waiver. The court grants your request and waives your additional superior court fees and costs that are checked below. *(Cal. Rules of Court, rule 3.56.)* You do not have to pay for the checked items.

| Jury fees and expenses | Fees for a peace officer to testify in court |
|----------------------------------|--|
| Fees for court-appointed experts | Court-appointed interpreter fees for a witness |
| Other (specify): | |

| b. 🗌 The | court denies your fee waiver request because: |
|----------|--|
| Wa | rning! If you miss the deadline below, the court cannot process your request for hearing or the court papers if led with your original request. If the papers were a notice of appeal, the appeal may be dismissed. |
| (1) | Your request is incomplete. You have 10 days after the clerk gives notice of this Order (see date of service on next page) to: |
| | • Pay your fees and costs, or |
| | File a new revised request that includes the incomplete items listed: Below On Attachment 4b(1) |
| | |
| (2) | The information you provided on the request shows that you are not eligible for the fee waiver you requested for the reasons stated: Below On Attachment 4b(2) |
| | |
| | |
| | |
| | The court has enclosed a blank <i>Request for Hearing About Court Fee Waiver Order (Superior Court)</i> (form FW-006).You have 10 days after the clerk gives notice of this order (see date of service below) to: Pay your fees and costs in full or the amount listed in c below, or Ask for a hearing in order to show the court more information. (Use form FW-006 to request hearing.) |
| c. (1) | The court needs more information to decide whether to grant your request. You must go to court on the date on page 3. The hearing will be about the questions regarding your eligibility that are stated: Below D n Attachment 4c(1) |
| | |
| | |
| | |
| (2) | Bring the items of proof to support your request, if reasonably available, that are listed: Below D n Attachment 4c(2) |
| | |
| | |
| | |
| | |
| | |

This is a Court Order.

| name: | | |
|-----------------------------|-----------------------------|--|
| Hearing Date Dept.: | Time: Room: | Name and address of court if different from abov |
| | | |
| request to waive court fees | , and you will have 10 days | o court on your hearing date, the judge will deny your s to pay your fees. If you miss that deadline, the court ca f the papers were a notice of appeal, the appeal may be |

Request for Accommodations



Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the hearing. Contact the clerk's office for *Request for Accommodations by Persons With Disabilities and Response* (form MC-410). (Civ. Code, § 54.8.)

Clerk's Certificate of Service

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

- \Box 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: _____



Notice to Court of Improved **FW-010** CONFIDENTIAL **Financial Situation or Settlement** Clerk stamps date here when form is filed. Your Information (person with a fee waiver): 1 Name: ______ 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 San Diego Date of your **last** court fee waiver order in this case: 3) (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) \square 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. \Box 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) \square 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:

Print your name here

Sign here