Instructions for Requesting a **Fee Waiver**

WHEN TO USE THIS PACKET:

Use this packet if you are filing papers with the court that require you to pay a filing fee and you cannot afford to pay the fees. If you are low income or receiving aid, you may qualify for a waiver of your court fees. Review the Information sheet carefully to see if you qualify.

If you are receiving SSI, SSP, CalWORKS, Food Stamps, County Relief, General Relief, Medi-Cal, Food Stamps, IHSS, Tribal TANF or CAPI, you qualify for a fee waiver.

If your gross household income is below the amount set out in the chart on the Information Sheet for the number of people living in your home, you qualify for a fee waiver.

This packet includes:

| ☐ Information Sheet on Waiver of Court Fees and Costs | FW-001 INFO |
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| ☐ Application for Waiver of Court Fees and Costs | FW-001 |
| ☐ Order for Application for Waiver of Court Fees and Costs | FW-003 |

Revised 1/8/2021

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 \$25,000)
 - Making and certifying copies
 - Sheriff's fee to give notice
 - Court fee for telephone hearing
- Giving notice and certificates
- Sending papers to another court department
- 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
 - Other necessary court fees

- Fees for a peace officer to testify in court
- Court-appointed interpreter fees for a witness
- 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. 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 (not Social Security)
 - 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
- 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); and 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 to 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. You should use form FW-020 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 https://courts.ca.gov/selfhelp-appeals.htm.



Request to Waive Court Fees

| | CONFIDENTIAL |
|--|---|
| f you are getting public benefits, are a low-income person, or do not have mough income to pay for your household's basic needs and your court fees, you may use this form to ask the court to waive 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 | Fill in court name and street address: |
| • 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 fees and costs. The court may also charge you any collection costs. | Superior Court of California, County of |
| Your Information (person asking the court to waive the fees): Name: Street or mailing address: | |
| Street or mailing address: State: Zip: | Fill in case number and name: |
| Phone: | Case Number: |
| Your Job, if you have one (job title): Name of employer: Employer's address: | Case Name: |
| 3 Your Lawyer, if you have one (name, firm or affiliation, address, phone | number, and State Bar number): |
| | |
| a. The lawyer has agreed to advance all or a portion of your fees or costsb. (If yes, your lawyer must sign here) Lawyer's signature: | |
| If your lawyer is not providing legal-aid type services based on your lo | ow income, you may have to go to a |

| 4 | What court's fees or costs are you asking to be waived? |
|---|---|
| | Superior Court (See <i>Information Sheet on Waiver of Superior Court Fees and Costs</i> (form FW-001-INFO).) Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See <i>Information Sheet on Waiver</i>) |
| | of Appellate Court Fees (form APP-015/FW-015-INFO).) |

5) Why are you asking the court to waive your court fees? a. I receive (check all that apply; see form FW-001-INFO for definitions): Food Stamps Supp. Sec. Inc. SSP Medi-Cal County Relief/Gen. Assist. IHSS CalWORKS or Tribal TANF CAPI

b. My gross monthly household income (before deductions for taxes) is less than the amount listed below. (If you check 5b, you must fill out 7, 8, and 9 on page 2 of this form.)

| Family Size | Family Income | Family Size | Family Income | Family Size | Family Income | If more than 6 people |
|-------------|---------------|-------------|----------------------|-------------|---------------|------------------------|
| 1 | \$1,341.67 | 3 | \$2,287.50 | 5 | \$3,233.34 | at home, add \$472.92 |
| 2 | \$1,814.59 | 4 | \$2,760.42 | 6 | \$3,706.25 | for each extra person. |

c. I do not have enough income to pay for my household's basic needs *and* the court fees. I ask the court to: (check one and you **must** fill out page 2):

waive all court fees and costs waive some of the court fees let me make payments over time

Check here if you asked the court to waive your court fees for this case in the last six months. (If your previous request is reasonably available, please attach it to this form and check here:)

I declare under penalty of perjury under the laws of the State of California that the information I have provided

| on this form and all attachments is true and correct. | |
|---|-----------|
| Date: | • |
| Print your name here | Sign here |

| Your name: | | Case Number: | |
|--|---|---|--|
| If you checked 5a on page 1, do not fill out below. If you fill out below. If you checked 5c, you must fill out this entire page. If you checked and write Financial Information and your | ou need more spa | ice, attach form MC-0 | |
| 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) | a. Cash b. All financial acc (1) (2) (3) c. Cars, boats, and Make/Year (1) (2) (3) d. Real estate Address (1) (2) e. Other personal stocks, bonds, e. Describe (1) (2) 11 Your Monthly Da. List any payrol (1) (2) (3) (4) b. Rent or house c. Food and house d. Utilities and tell e. Clothing f. Laundry and cl. g. Medical and de h. Insurance (life, i. School, child c. j. Child, spousal k. Transportation | d Property ounts (List bank name and | How Much You Still Owe S S How Much You Still Owe S S S S S S S S S S S S S |
| 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 | (1) | gs withheld by court order thly expenses (list each below | - \$ |
| days on form FW-010. | Total monthly expe | enses (add 11a-11n 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: | |
| Street or mailing address: State: Zip: | |
| 2 Lawyer, if person in 1 has one (name, firm name, addition phone number, e-mail, and State Bar number): | ress, |
| | Fill in court name and street address: |
| | |
| 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 name: |
| The court made a previous fee warver order in this case on | Case Number: |
| Read this form carefully. All checked boxes 🗹 are court ord | Case Name: |
| to pay the fees. If you settle your civil case for \$10,000 or more, the amount of the waived fees. The trial court may not dismiss the case of the court makes the following orders: | until the lien is paid. |
| a. The court grants your request, as follows: | |
| (1) Fee Waiver. The court grants your request and wa Rules of Court, rule 3.55 and 8.818.) You do not he Filing papers in superior court Making copies and certifying copies Sheriff's fee to give notice Reporter's fee for attendance at hearing or trial, if and you request that the court provide an official respective. Assessment for court investigations under Probate Preparing, certifying, copying, and sending the cle Holding in trust the deposit for a reporter's transcript or copy of an official electronic | ave to pay the court fees for the following: Court fee for phone hearing Giving notice and certificates Sending papers to another court department the court is not electronically recording the proceeding eporter Code section 1513, 1826, or 1851 rk's transcript on appeal ipt on appeal under rule 8.130 or 8.834 |
| | |

| Your | name: _ | | Case Number: |
|------|---------|---|---|
| b. | Th | e court denies your fee waiver request because: | |
| | | Varning! If you miss the deadline below, the court cannot process your recount filed with your original request. If the papers were a notice of appeal, the | |
| | (1) | Your request is incomplete. You have 10 days after the clerk give service on next page) to: • Pay your fees and costs, or • File a new revised request that includes the incomplete item Below On Attachment 4b(1) | |
| , | (2) | The information you provided on the request shows that you are not requested for the reasons stated: Below On Attachment | |
| | | | |
| | | The court has enclosed a blank <i>Request for Hearing About Court</i> (form FW-006). You have 10 days after the clerk gives notice of a Pay your fees and costs in full or the amount listed in c belo • Ask for a hearing in order to show the court more information hearing.) | this order (see date of service below) to: ow, or |
| c. | (1) | The court needs more information to decide whether to grant your date on page 3. The hearing will be about the questions regarding Below On Attachment 4c(1) | |
| | | | |
| | | | |
| | (2) | Bring the items of proof to support your request, if reasonably available Below On Attachment 4c(2) | ailable, that are listed: |
| | | | |
| | | | |
| | | | |
| | | | |

| ır name: | | | Case Number: | |
|--|--|--|---|-------------------------|
| | | Name a | and address of court if | different from above: |
| Hearing Date: | Time: | | | |
| Date Dept.: | Room: | | | |
| | | | | |
| request to waive court | is checked, and you do not go to of fees, and you will have 10 days to ers you filed with your request. If the | o pay your fees | . If you miss that dead | line, the court cannot |
| Date: | | of (check one): | Judicial Officer | Clerk, Deputy |
| are available | Request for Ac stening systems, computer-assisted if you ask at least five days befortions by Persons With Disabilities | d real-time capt ore the hearing. | tioning, or sign langua Contact the clerk's of | fice for Request for |
| | | | | |
| | Clerk's Certific | cate of Serv | ice | |
| | Clerk's Certifice ed in this case and (check one): | cate of Serv | ice | |
| rtify that I am not involve | | | | urt, on the date below. |
| rtify that I am not involve I handed a copy of this C This order was mailed fi | ed in this case and <i>(check one):</i> Order to the party and attorney, if irst class, postage paid, to the part | any, listed in (| 1) and 2), at the co | |
| rtify that I am not involve I handed a copy of this C This order was mailed fi from (city): | ed in this case and (check one): Order to the party and attorney, if irst class, postage paid, to the part Ling is attached. | any, listed in (ty and attorney, ifornia on the d | 1) and 2), at the co if any, at the addresse ate below. | es listed in 1 and 2 |
| rtify that I am not involved I handed a copy of this Country This order was mailed fiften (city): A certificate of mail | ed in this case and (check one): Order to the party and attorney, if irst class, postage paid, to the part Ling is attached. | any, listed in (ty and attorney, ifornia on the d | 1) and 2), at the co if any, at the addresse ate below. | |