IN THE CIRCUIT/COUNTY COURT OF THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR _____COUNTY, FLORIDA

_____ CASE NO._____
Plaintiff/Petitioner or In the Interest of
vs.
_____
Defendant//Respondent

APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS

Notice to Applicant: If you qualify for civil indigence, the filing and summons fees are waived; other costs and fees are not waived.

1. **I have _____dependents.** *(Include only those persons you list on your U.S. Income tax return.)*
Are you Married?...Yes….No Does your Spouse Work?...Yes….No Annual Spouse Income? $_____

2. **I have a net income of** $_____ paid ( )weekly ( )every two weeks ( )semi-monthly ( )monthly ( )yearly ( )other _____.
(Net income is your total income including salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, ***minus*** *deductions required by law and other court-ordered payments such as child support.)*

3. **I have other income** paid ( )weekly ( )every two weeks ( )semi-monthly ( )monthly ( )yearly ( )other _____.
(Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

Second Job	Yes $ _____	No	Veterans' benefits	Yes $_____	No
Social Security benefits			Workers compensation	Yes $_____	No
For you	Yes $ _____	No	Income from absent family members	Yes $_____	No
For child(ren)	Yes $ _____	No	Stocks/bonds	Yes $_____	No
Unemployment compensation	Yes $ _____	No	Rental income	Yes $_____	No
Union payments	Yes $ _____	No	Dividends or interest	Yes $_____	No
Retirement/pensions	Yes $ _____	No	Other kinds of income not on the list	Yes $_____	No
Trusts	Yes $ _____	No	Gifts	Yes $_____	No

I understand that I will be required to make payments for costs to the clerk in accordance with §57.082(5), Florida Statutes, as provided by law, although I may agree to pay more if I choose to do so.

4. **I have other assets:** *(Circle "yes" and fill in the value of the property, otherwise circle "No")*

Cash	Yes $_____	No	Savings account	Yes $_____	No
Bank account(s)	Yes $_____	No	Stocks/bonds	Yes $_____	No
Certificates of deposit or			Homestead Real Property*	Yes $_____	No
Money market accounts	Yes $_____	No	Motor Vehicle*	Yes $_____	No
Boats*	Yes $_____	No	Non-homestead real property/real estate*	Yes $_____	No
*show loans on these assets in paragraph 5			Other assets*	Yes $_____	No

Check one: I ( )DO ( )DO NOT expect to receive more assets in the near future. The asset is_____.

5. **I have total liabilities and debts of** $_____ as follows: Motor Vehicle $_____, Home $_____, Other Real Property $_____, Child Support paid direct $_____, Credit Cards $_____, Medical Bills $_____, Cost of medicines (monthly) $_____, Other $_____.

6. **I have a private lawyer in this case**…… ☐ Yes ☐ No

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 57.082, F.S. commits a misdemeanor of the first degree, punishable as provided in s.775.082, F.S. or s. 775.083, F.S. **I attest that the information I have provided on this application is true and accurate to the best of my knowledge**.

Signed on _____, 20____.

_____ _____
Year of Birth Last 4 digits of Driver License or ID Number

Email address: _____

_____
Signature of Applicant for Indigent Status

Print Full Legal Name _____

Phone Number/s: _____

_____
Address: Street, City, State, Zip Code

This form was completed with the assistance of: _____
Clerk/Deputy Clerk/Other authorized person.

CLERK'S DETERMINATION

Based on the information in this Application, I have determined the applicant to be ( ) Indigent ( ) Not Indigent, according to s. 57.082, F.S.

Dated on _____, 20 ____.

_____
Clerk of the Circuit Court
By _____, Deputy Clerk

APPLICANTS FOUND NOT TO BE INDIGENT MAY SEEK REVIEW BY A JUDGE BY ASKING FOR A HEARING TIME. THERE IS NO FEE FOR THIS REVIEW.
Sign here if you want the judge to review the clerk's decision _____