How to...

# APPLY FOR A DEFERRAL OR WAIVER OF FEES



Arizona law requires the court to charge filing fees, service fees and other fees to cover costs. Court fees are due at the time of filing or at the time of requesting service.

If you wish to file a civil (or small claims) case or a court document and you cannot afford to pay the applicable court fee(s) you may apply for a fee deferral or waiver. The court will review your financial situation as presented in the application to determine if you qualify for a fee deferral or waiver. If the court grants you a deferral, you may be required to pay a portion of the fee now and still owe the balance of the fee(s) to the court. You will be given additional time to pay the balance. If you are granted a waiver you will not be required to pay the fee.

Fees that may be included in a request for deferral or waiver are:

- ~ Filing fees or Answer fees
- ~ Constable Service fees (some restrictions apply, check with the court clerk regarding this fee)
- ~ Summons or Subpoena Issuance fees
- ~ Appeal Preparation and Filing fees
- ~ One Certified (final judgment) Copy fee

If your fees are deferred, upon final judgment in your case the court will send you a notice of fees due. You have 20 days after the final judgment to: pay the amount due, to request additional time to pay, or to apply for a fee waiver. If no request is made within 20 days, the full payment is due.

### Please PROCEED...

- ~ If you believe your current financial circumstances will allow you to qualify for a fee deferral or waiver.
- ~ If your case is a civil case (includes small claims, orders of protection, injunctions against harassment)

### **FORMS Needed:**

- ~ Application for Deferral of Court Fees and/or Costs and Consent to Entry of Judgment (Use this form or the next, below)
- ~ Application for Deferral or Waiver of Service of Process Fees for Injunctions Against Harassment and Consent to Entry of Judgment
- ~ Affidavit in Support of Application for Deferral or Waiver of Service of Process Costs

### **INSTRUCTIONS**

- 1) Fill out applicable Application for Deferral of Fees and/or Costs and Consent to Entry of Judgment form. Be sure to check the boxes that tell the court which fees and/or costs you need deferred or waived. If you receive government assistance, please attach current proof. DO NOT sign the application form until you are either in the presence of a notary public or a court clerk.
- 2) If you are requesting that service fees be deferred or waived, complete the Affidavit in Support of Application for Deferral or Waiver of Service of Process Costs form.
- 3) Make 2 copies of each completed form and file with the court clerk.



# **Maricopa County Justice Courts, Arizona**

|  | CASE NUMBER:   |
|--|--|
|  |  |
|  | <u> </u>   |
| ( ) -  | ( ) -  |
| Petitioner / Plaintiff   | Respondent / Defendant   |
|  | WAIVER OF COURT FEES AND COSTS ENTRY OF JUDGMENT   |
|  |  |
| This application for Deferral of Court Fees and Costs include agree a judgment may be entered against you for all fees and entry of final judgment. At the conclusion of the case, you we much is owed and what steps you must take to avoid a judgr | ORTANT es a Consent to Entry of Judgment. By signing this consent, you d costs that are deferred but remain unpaid thirty (30) days after vill receive a Notice of Court Fees and Costs Due indicating how ment against you if you are still unable to pay. Additional details ent to Entry of Judgment section of this application. |
| state under penalty of perjury that the statements made in th  | nis application are true.  |
| I am requesting a deferral or waiver of the following fees and o   | costs in my case.  |
|  | ssuance of either a summons and subpoena; or fees for obtaining relations case or a final order or judgment in a civil proceeding.   |
| ☐ Fees for service of process by a constable.  |  |
| $\hfill \square$ Filing fees and photocopy fees for the preparation of the   | he record on appeal.   |
| The basis for the request is:  |  |
| 1. WAIVER: I am permanently unable to pay. My inco<br>the daily essentials of life and unlikely to change in the   | ome and liquid assets are insufficient or barely sufficient to meet the foreseeable future.  |
| ☐ 2. DEFERRAL:   |  |
| a. I receive governmental assistance from the state  | te / federal program(s) checked below:   |
| ☐ Temporary Assistance for Needy Families (TAN   | NF)  |
| ☐ Supplemental Security Income (SSI) for disabili  | ities General Assistance (GA)  |
| If you checked either boxes 1 or 2a., you must complete the in front of the court clerk or a notary public, if submitted by receive governmental assistance if you are submitting this a photocopy of that proof.                                    | mail or a third party. You must also submit proof that you   |
| OR  b. My income is insufficient or is barely sufficient to could be budgeted for the fees and costs that ar   | o meet the daily essentials of life, and includes no allotment that re required to gain access to the court.   |

| NOTE: To determine whether income is insufficient or barely suffi<br>Among the factors the court may consider are:  | cient, the court will review your income and expenses.  |  |
|---|---|--|
| <ol> <li>Whether your gross income as computed on a monthly basis is monthly income includes your share of community property income.</li> <li>Although your income is greater than 150% of the poverty level, medical expenses and costs of care for elderly or disabled family extraordinary that reduce your gross monthly income to at or be</li> </ol> | ome if available to you.  you have proof of extraordinary expenses (including y members) or other expenses that the court finds are |  |
| OR  C. I do not have the money to pay the court fees and contemporary Explain:  | sts now. I can pay the fees and costs at a later date.  |  |
|   |   |  |
| f you checked either boxes 2b. or 2c., you must complete the Finar<br>of the court clerk or a notary public , if submitted by mail or a third p   |   |  |
| FINANCIAL QUESTIC   | NNAIRE  |  |
| SUPPORT RESPONSIBILITIES: List all persons you support (inclu   | uding paying child support and spousal maintenance):  |  |
| NAME  | RELATIONSHIP  |  |
|   |   |  |
| STATEMENT OF INCOME AND EXPENSES  |   |  |
| ASSISTANCE: I receive assistance from:  |   |  |
| ☐ Arizona Health Care Cost Containment System (AHCCCS)  |   |  |
| ☐ Arizona Long Term Care System (ALTCS)   |   |  |
| Other (explain):  |   |  |
| MONTHLY INCOME: My monthly income is:   |   |  |
| Monthly gross income:   |   |  |
| Employer name:  |   |  |
| Employer address:   |   |  |
| Employed since (month/year):  |   |  |
| Other current monthly income, including spousal maintenance, retire grants, royalties, lottery winnings (explain amount and source):  | ement, rental, interest, pensions, dividends, scholarships,   |  |
|   |   |  |
| TOTAL MONTHLY INCOME: \$  |   |  |

## **MONTHLY EXPENSES AND DEBTS**: My monthly expenses and debts are:

|  | PAYMENT AMOUNT  | LOAN BALANCE                                   |
|--|---|--|
| Rent/Mortgage payment  | \$  | \$   |
| Car payment  | \$  | \$   |
| Credit card payments   | \$  | \$   |
| Other payments & debts   | \$  | \$   |
| Explain:   |   |  |
| Food / Household supplies  | \$  |  |
| Utilities/Telephone  | \$  |  |
| Clothing   | \$  |  |
| Medical/Dental/Drugs   | \$  |  |
| Health Insurance   | \$  |  |
| Nursing care   | \$  |  |
| Laundry  | \$  |  |
| Child support  | \$  |  |
| Child care   | \$  |  |
| Spousal maintenance  | \$  |  |
| Car insurance  | \$  |  |
| Gasoline/Bus fare  | \$  |  |
| Contributions to employer or other retirement account                                      | \$  |  |
| TOTAL MONTHLY PAYMENTS   | \$  |  |
| <b>STATEMENT OF ASSETS</b> : Lists only those as as market value minus any liens or loans. | ssets available to you and accessible ESTIMATED VALUE | e without financial penalty. Equity is defined |
| Cash and bank accounts   | \$  |  |
| Credit Union accounts  | \$  |  |
| Equity in:   | \$  |  |
| 1. Home  | \$  |  |
| 2. Other property  | \$  |  |
| 3. Cars/other vehicles   | \$  |  |
| Other including stocks, bonds, etc.  | \$  |  |
| Retirement accounts  | \$  |  |
| TOTAL ASSETS   | \$  |  |

|                                    | DESCRIPTION  | AMOUNT   |   |
|------------------------------------|--|--|---|
| _                                  |  | \$   |   |
| _                                  |  | \$   |   |
|                                    |  | \$   |   |
|                                    | TOTAL EXTRAORDI  | NARY EXPENSES \$   |   |
| AND (<br>believe<br>wheth<br>conse | : If you receive a deferral and have unpaid fees at the COSTS DUE. This is to remind you that you may subset you need more time to pay or cannot afford to pay year or not you must pay. If you do not file a supplement judgment may be entered against you if you do not case is dismissed for any reason, the fees and costs  | mit a supplemental application for further down court fees and costs. The court will dental application, the original deferral order retays within thirty (30) calendar days after e | eferral or waiver if you cide at that time emains in effect and a |
| fees an                            | ENT TO ENTRY OF JUDGMENT: By signing this Ap d costs that are deferred but remain unpaid thirty (30 against me unless any one of the following applies:  |  |   |
| B.<br>C.<br>D.                     | Fees and costs are taxed to another party;<br>I have an established schedule of payments in effect<br>I file a supplemental application for waiver or further<br>In response to a supplemental application, the court<br>Within twenty days of the date the court denies the s   | deferral of fees and costs and a decision by<br>orders that the fees and costs be waived or  |   |
|                                    | <ol> <li>Pay the fees and costs; or,</li> <li>Request a hearing on the court's order denying cannot enter the consent judgment unless a he has not been made within the time prescribed less than the consent judgment unless a hear than the second less than the consent judgment unless a hear than the consent judgment unless a hear than the consent judgment unless that the consent judgment unless than the consent judgment unless that the consent judgment</li></ol> | earing is held, further deferral or waiver is de   |   |
|                                    | ppeal the final decision in your case, a consent judg  |  | ain unpaid in the lower   |
| ACKNO                              | WLEDGMENT AND SIGNATURE UNDER OATH   |  |   |
| state ι                            | under penalty of perjury that the foregoing is true and  | correct.   |   |
|                                    |  |  |   |
| I                                  | Date:  | Signature:   |   |

Print your name: \_\_\_\_\_



# Maricopa County Justice Courts, Arizona

| Name of Petitioner/Plai                                      | ntiff                     | CASE NUMBER:   |
|--|---------------------------|--|
| Name of Respondent/D<br>STATE OF ARIZONA<br>COUNTY OF MARICO | ,                         | AFFIDAVIT IN SUPPORT OF APPLICATION FOR DEFERRAL OR WAIVER OF SERVICE OF PROCESS COSTS   |
|  |                           | ATH. I swear or affirm that the information in this application is true and prosecution for perjury if it is determined that I did not tell the truth. |
| I have requested a deferral or                               | · waiver of the following | g fees in my case:   |
| Fees for service of proc<br>state that (check and co         |                           | nal, constable, or law enforcement agency: In support of my request, I   |
| ☐ I have attempted t   | o obtain voluntary acc    | eptance of service of process without success on the person to be served   |
| ☐ It would be useles served because (6                       |                           | to try to obtain voluntary acceptance of service by the person to be   |
| ☐ An enforceable inj   | unction against harass    | sment has been granted to me against the person to be served.  |
|  |                           | I state that I have attempted to locate the person to be served but I have complete any that apply):   |
| ☐ This is what I did t                                       | o try to find the other p | party (explain):   |
| ☐ I have contacted t   | he person(s) listed bek   | ow to try to find the location of the other party.   |
| N  | AME                       | ADDRESS  |
|  |                           |  |
|  | SIGNATURE                 | UNDER PENALTY OF PERJURY   |
| Today's Date:  | _<br>Signature            | Printed Name   |
|  | •                         | MATION FOR SERVICE   |
| You must provide the following                               |                           |  |
| To the best of my knowledge,                                 | as of (date)              | , the last known address of the person to be served was:   |
|  |                           |  |
|  |                           |  |