

EXHIBIT A

**IN THE CIRCUIT/COUNTY COURT OF THE SEVENTH 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 do not qualify for civil indigency and you cannot afford to pay the filing fee, you must enroll in the Clerk's Office payment plan and pay a one-time administrative fee of \$25.00.

1. **I have _____ dependents.** (Do not include children not living a home and do not include a working spouse or yourself.)
2. **I have a take-home income of \$ _____** paid () weekly () bi-weekly () semi-monthly () monthly () yearly.
(Take home income equals salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, minus deductions required by law and other court ordered support payments.)
3. **I have \$ _____ in other income** paid () weekly () bi-weekly () semi-monthly () monthly () yearly. (Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

Social Security benefits	Yes \$ _____	No	Veteran's benefits	Yes \$ _____	No
Unemployment compensation	Yes \$ _____	No	Child Support or other regular support		
Union funds	Yes \$ _____	No	from family members/spouse	Yes \$ _____	No
Workers compensation	Yes \$ _____	No	Rental income	Yes \$ _____	No
Retirement/pensions	Yes \$ _____	No	Dividends or interests	Yes \$ _____	No
Trusts or gifts	Yes \$ _____	No	Other kinds of income not on the list	Yes \$ _____	No

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

Cash	Yes \$ _____	No	Savings	Yes \$ _____	No
Bank account(s)	Yes \$ _____	No	Stocks and bonds	Yes \$ _____	No
Certificates of deposit or money market account	Yes \$ _____	No	*Equity in Real estate (excluding homestead)	Yes \$ _____	No
*Equity in Boats and other tangible Property	Yes \$ _____	No	*Equity in Motor vehicles	Yes \$ _____	No

5. **I have total amount of liabilities and debts in the amount of \$ _____ .**

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 F.S. 57.082 commits a misdemeanor of the first degree, punishable as provided in s.775.082 or s.775.083. **I attest that the information I have provided on this application is true and accurate to the best of my knowledge.**

Signed this _____ day of _____, 20____.

Signature of Applicant for Indigent Status

Date of Birth

Print Full Legal Name

Driver's License or ID Number

Address, P O Address, Street, City, State, Zip Code

Note: If applicant is determined by the clerk to be Not Indigent, you may seek judicial review by filing a petition to review.

CLERK'S DETERMINATION

Based on the information in this Application, I have determined the applicant to be _____ **Indigent** _____ **Not indigent**, according to 57.082, F.S.

Dated this _____ day of _____, 20__.

By _____

Deputy Clerk
Clerk/Deputy Clerk/Other.

This form was completed with the assistance of _____