

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 _____