

Defendant/Minor Child

APPLICATION FOR CRIMINAL INDIGENT STATUS

- I AM SEEKING THE APPOINTMENT OF THE PUBLIC DEFENDER OR
 I HAVE A PRIVATE ATTORNEY OR AM SELF-REPRESENTED AND SEEK DETERMINATION OF INDIGENCE STATUS FOR COSTS

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 27.52, F.S. commits a misdemeanor of the first degree, punishable up to 1 year in jail or up to \$1,000 in fines, as provided in s. 775.082, F.S. or s. 775.083, F.S. I attest that the information provided on this application is true and accurate.

Signed on _____ Year of Birth _____ Last four digits of Driver's License or ID Number _____	Signature of applicant for indigent status _____ Print full legal name: _____ Address: _____ City, State, Zip: _____ Phone number: _____ E-mail Address: _____
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Notice to Applicant: There is a \$50.00 fee for each application filed. The public defender/court appointed lawyer and costs/due process services are not free and a lien may be imposed on all property you own. If you are a parent/guardian making this affidavit on behalf of a minor or tax-dependent adult, the information contained in this application must include your income and assets.

1. I have _____ dependents. (Do not include children not living at home and do not include a working spouse or yourself.)
2. I have take home pay of \$ _____ paid weekly bi-weekly semi-monthly monthly yearly Include cash payments. Take home pay (net income) is total salary and wages, minus deductions required by law, including court-ordered support payments
3. I have other income paid weekly bi-weekly semi-monthly monthly yearly: (Check "Yes" and fill in the amount if you have this kind of income, otherwise check "No.")

Social Security benefits..... <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Workers compensation..... <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No
Unemployment compensation..... <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Regular support from absent family members..... <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No
Union payments <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Rental income <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No
Retirement/pensions <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Dividends or interest <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No
Trusts or gifts <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Other kinds of income not on the list <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No
Veterans' benefit..... <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	
4. I have other assets: (Check "yes" and fill in the value of the property, otherwise check "No")

Cash <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Bank/Savings account(s)..... <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No
*Car/Motor Vehicle..... <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Stocks/bonds/Certificates of Deposit.. <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No
Money market accounts <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	*Homestead real estate <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No
*Boats/other tangible property..... <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	*Non-homestead real estate <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No

*show loans on these assets in paragraph 5

Check one: I DO/ DO NOT expect to receive more assets in the near future. The asset and value is _____.

5. I have total liabilities and debts in the amount of \$ _____. I have loan balances on assets in paragraph 4:
 Car/Motor Vehicle \$ _____; Homestead \$ _____; Non-homestead real estate \$ _____;
 Boat \$ _____; Other tangible property (identify here) _____ and loan balance \$ _____.
6. I receive: (Check all applicable payments received")

<input type="checkbox"/> Temporary Assistance for Needy Families- Cash Assistance	<input type="checkbox"/> Supplemental Security Income (SSI)
<input type="checkbox"/> Poverty-related veterans' benefits	
7. I have been released on bail in the amount of \$ _____. Cash Surety Posted by: Self Family Other

CLERK DETERMINATION

_____ Based on the information in this Application, I have determined the applicant to be () Indigent () Not Indigent
 _____ The Public Defender is hereby appointed to the case listed above until relieved by the Court.
 Dated this ____ day of _____, 20____

 Clerk of the Circuit Court, by Deputy Clerk

APPLICANTS FOUND NOT INDIGENT MAY SEEK REVIEW BY ASKING FOR A HEARING TIME. Sign here if you want the judge to review the clerk's decision of not indigent: _____