TIOGA COUNTY, PENNSYLVANIA

DIVORCE FEE WAIVER APPLICATION

SELF-HELP PACKAGE

Prepared by the Tioga County Bar Association for use by indigent pro se litigants in Tioga County, Pennsylvania

THIS PACKAGE IS FOR USE WHEN YOU CANNOT AFFORD TO PAY THE FILING FEE IN A DIVORCE CASE AND YOU ARE ASKING THE COURT TO WAIVE ANY APPLICABLE FILING FEES

THIS PACKAGE IS INTEND FOR USE IN CONJUNCTION WITH THE '*DIVORCE COMPLAINT SELF-HELP PACKAGE*.'

INSTRUCTIONS:

If you cannot afford to pay any of the filing fees associated with your divorce case, the court may waive filing fees and costs if you can show the court that you qualify for the waiver. In order to apply, you should complete the fill-in-the-blank application included in this package.

STEP 1: FILL IN THE CAPTION ON THE APPLICATION TO WAIVE FEES AND COSTS

If this is a new case: On the top of the first page of the Application to Waive Fees and Costs, write your own name in the blank space for 'Plaintiff' and the other party's name in the blank space for 'Defendant." Do not fill in the docket number; the court will assign a number when you go to the courthouse. When you are done, the top of the first page should look something like this:

IN THE COURT OF COMMON PLEAS
OF TIOGA COUNTY, PENNSYLVANIA

Jane Q. Doe
Plaintiff

v.

John X. Doe
Defendant

NO: ___ FS ____

CIVIL ACTION - DIVORCE

APPLICATION TO WAIVE FEES AND COSTS

If this is an existing case: Fill in the caption on the top of the first page with the names listed in the same order as on the other documents in your case, and use the same docket number that has already been assigned to your case.

STEP 2: ANSWER THE QUESTIONS IN THE APPLICATION

Pages 2 through 5 of the application asks you about your background and financial resources. Fill it out completely and truthfully to the best of your ability. If you receive any of the public benefits listed in Question 2 on Page 1, then you can leave the rest of the application blank and skip ahead to the Verification section on page 5. **Otherwise, answer every single question. Use "N/A" for "not applicable" or "$0.00" where appropriate**.

STEP 3: SIGN THE APPLICATION

By signing the Verification on Page 5 of the Application and filing it with the court you are asserting that the information you provide is true and correct to the best of your knowledge, information, and belief. If you intentionally provide false information in a document you submit to the court, you may be subject to criminal charges under 18 PA. C.S.A. § 4904. **You must notify the court if your financial situation improves after a waiver is granted.**

STEP 4: PREPARE THE PROPOSED ORDER

Complete the caption on the proposed order the same way you completed the caption on your Application, but leave the rest of the proposed order blank for the judge to fill out.

STEP 5: COMPLETE THE REST OF YOUR PAPERWORK & GO TO THE COURTHOUSE

Complete the 'Divorce Self-Help Package' or other documents that are seeking to file without paying a filing fee, and go to the Prothonotary's office at the Tioga County Courthouse. At the Prothonotary's office, they will take your Application and forward it to the judge for a decision. Sometimes you will get an answer while you wait, other times they will need you to come back later because the judge isn't available. If your Application is granted, you will not need to pay the filing fee. If your application is rejected, you will need to pay the filing fee within thirty (30) days or your case may be dismissed.

PLEASE BE AWARE THAT IF YOU HIRE AN ATTORNEY AFTER YOUR APPLICATION HAS BEEN APPROVED, THE COURT WILL NORMALLY REQUIRE YOU TO PAY THE FILING FEE. THE ONLY EXCEPTION IS IF YOUR ATTORNEY IS REPRESENTING YOU WITHOUT COST, AND IF YOUR ATTORNEY FILES A NOTICE WITH THE COURT STATING THAT THEY ARE REPRESENTING YOU WITHOUT COST. IT IS YOUR DUTY TO INFORM THE COURT IF YOUR SITUATION CHANGES AND YOU CAN AFFORD TO PAY THE FILING FEE, OR IF YOU HAVE HIRED AN ATTORNEY TO REPRESENT YOU AFTER YOUR APPLICATION TO WAIVE FEES AND COSTS IS GRANTED.

This Self-Help Application to Waive Fees and Costs Package is provided by the Tioga County Bar Association for the benefit of pro se custody litigants in Tioga County, Pennsylvania and may be reproduced without restriction. No warranties of any kind are made in connection with these instructions or the included documents, nor is this package intended as a substitute for individualized legal advice. For further assistance, please contact North Penn Legal Services at (877) 953 – 4250

ADDITIONAL CONTENTS OF THIS PACKAGE:
-APPLICATION TO WAIVE FEES AND COSTS (5 PAGES)
-PROPOSED ORDER (1 PAGE)

IN THE COURT OF COMMON PLEAS
OF TIOGA COUNTY, PENNSYLVANIA

____________________________	:	
Plaintiff	:	
v.	:	
	:	**NO: _____ FS ______**
____________________________	:	
Defendant	:	**CIVIL ACTION - DIVORCE**

: :

APPLICATION TO WAIVE FEES AND COSTS

1. What is your full name and mailing address?

Name: ___________________________________

Address: ___________________________________

____

☐ Check this box if you are currently without a house or apartment

2. Do you currently receive any of the following public benefits?

Check all boxes that apply to you:

- ☐ Supplemental Nutrition Assistance Program (SNAP) (food stamps)
- ☐ Medicaid
- ☐ Supplemental Security Income (SSI) (*Not* Social Security Disability Insurance (SSDI))
- ☐ Temporary Assistance to Needy Families (TANF)
- ☐ Public Housing or Section 8 Housing
- ☐ Needs-based VA Pension
- ☐ Low-Income Energy Assistance
- ☐ Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- ☐ Other need-based federal, state, or local program: ________________________
  (Name of program)

If you checked any of the boxes in this question, then you can skip the remaining questions in this application form and sign the VERIFICATION on Page 5.

3. Do you support any children living with you?

I support ______ child(ren) under eighteen (18) years of age.

I support ______ adult child(ren) who is/are incapable of self-support due to a physical or mental disability.

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4. Tell the Court about your GROSS INCOME:

(Gross income means your income before paying taxes and other deductions)

Gross Income from Employment:

☐ I am currently EMPLOYED and I receive gross wages of $_____

paid ☐ weekly ☐ bi-weekly ☐ monthly ☐ yearly ☐ other: _____

from my employment as a _____ for _____.

or *(job title)* *(name of employer)*

☐ I am currently UNEMPLOYED.

Gross Income from Unemployment Compensation:

☐ I receive UNEMPLOYMENT COMPENSATION payments in the amount of $_____, which I receive ☐ weekly ☐ bi-weekly ☐ monthly.

(Pennsylvania Unemployment Compensation is usually paid weekly)

I was last employed on _____ for _____.

or *(date of last work)* *(name of employer)*

☐ I DO NOT receive UNEMPLOYMENT COMPENSATION.

Money regularly received from other people:

☐ I receive $_____ from other people as follows (explain):

_____.

or

☐ I DO NOT regularly receive money from other people.

Money received from other sources:

(Check all boxes that apply to you and provide the requested information)

☐ Retirement/Pension . . . . . $_____ ☐ weekly ☐ bi-weekly ☐ monthly

☐ Worker's Compensation . . . . $_____ ☐ weekly ☐ bi-weekly ☐ monthly

☐ Child/Spousal support . . . . . $_____ ☐ weekly ☐ bi-weekly ☐ monthly

☐ Disability payments . . . . . $_____ ☐ weekly ☐ bi-weekly ☐ monthly

☐ Social Security payments . . . $_____ ☐ weekly ☐ bi-weekly ☐ monthly

☐ Money from other source(s) . $_____ ☐ weekly ☐ bi-weekly ☐ monthly

(Describe the other source(s) of money: _____)

☐ I DO NOT receive money from other sources.

TOTAL GROSS MONTHLY INCOME

$_____ (add all of the above sources of income together)

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5. What PROPERTY and ASSETS do you own?

Cash:

I currently have $_____ in cash in my possession.

Bank accounts and other financial assets.

I currently have $_____ in one or more bank accounts.

I currently have $_____ in other financial assets.

Vehicles:

(Check all boxes that apply to you and provide the requested information)

☐ I DO NOT own any vehicles.

☐ I own a primary vehicle worth $_____.

☐ In addition to my primary vehicle, I also own _____ additional vehicle(s) worth a total of $_____. *(number)*

Homes and other real estate:

☐ I DO NOT own a home or any other real estate.

☐ I own my own home worth $_____.

☐ In addition to my own home, I also own other real estate worth a total of $_____.

Other assets:

☐ I DO NOT own any other valuable property or assets, *or*

☐ In addition to the above, I also own the following valuable property or assets:

Description:	Value:
_____	$_____
_____	$_____
_____	$_____
_____	$_____

TOTAL VALUE OF PROPERTY AND ASSETS

$_____ (add all of the above answers together)

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6. Tell the Court about your MONTHLY EXPENSES:

Rent or mortgage payments:

I pay $_____ per month towards rent or a mortgage for my home.

Food and household supplies:

I pay $_____ per month towards food and household supplies.

Utilities (including cell phone):

I pay $_____ per month towards utilities (including cell phone).

Clothing and other personal expenses:

I pay $_____ per month for clothing and other personal expenses.

Medical and dental expenses/insurance:

I pay $_____ for medical and dental expenses/insurance.

Childcare expenses:

I pay $_____ per month for childcare.

Transportation (including car payments and repairs) :

I pay $_____ per month for transportation, including car payments and repairs.

Child and spousal support and/or alimony:

I pay $_____ per month child support, spousal support, and/or alimony.

Other expenses:

I pay $_____ per month for the following additional expenses:

Describe: _____

_____

_____

TOTAL MONTHLY EXPENSES

$_____ (add all of the above expenses together)

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7. Tell the Court about any other facts you want the Court to consider:

Are there other facts that you would like the court to know about your circumstances that may help the court decide whether to grant your application, such as you are experiencing homelessness or you have health issues?

_____

_____

_____

_____

_____

VERIFICATION

I understand that I have a continuing obligation to inform the court of any improvement in my financial circumstances that would permit me to pay the fees and costs in this case. If I fail to inform the court of any changes in my circumstances, I understand that the court may rescind the waiver of fees and costs and order me to pay those fees and costs.

I verify that the statements made in this application are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

Date: _____ _____

Petitioner's Signature (pro se)

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IN THE COURT OF COMMON PLEAS
OF TIOGA COUNTY, PENNSYLVANIA

______________________________ *Plaintiff*	:	
v.	:	**NO: _____ FS ______**
______________________________ *Defendant*	:	**CIVIL ACTION - DIVORCE**

: :

ORDER REGARDING FEES AND COSTS

AND NOW, this _____ day of ______________, 20____, pursuant to Pa.R.Civ.P. 1990(e), upon consideration of an Application to Waive Fees and Costs submitted by ______________________________ ☐ this date, *or* ☐ on _______________, it is ORDERED, ADJUDGED, and DECREED as follows:

☐ The Application to Waive Fees and Costs is GRANTED without a hearing.

☐ Whereas the Application is of arguable merit and the court wishes to solicit further information, the Applicant is directed to appear for an ex parte hearing on such Application ☐ immediately, *or* ☐ on _______________ at _________________.m

☐ Whereas the court cannot determine eligibility solely on review of the Application, the Applicant is directed to submit the following supplemental information to complete or substantiate the application:

____

____

☐ The Application to Waive Fees and Costs is DENIED for the following reasons:

____

____

When an Application to Waive Fees and Costs is denied, the Applicant has thirty (30) days to pay the filing fees or the action will be terminated without further notice.

BY THE COURT,

_____________________ J.