

**INSTRUCTIONS FOR FILING A MOTION AND DECLARATION FOR WAIVER  
OF CIVIL FILING FEES AND SURCHARGES**

(A request for fee waiver, payment plan or deferment)

If you are on a low or fixed income you may qualify to have filing fees waived or reduced. You will need to fill out the attached Motion and Order for Waiver of Civil Filing Fees and Surcharges (including the Financial Statement).

Print clearly in black ink or type written.

Fill out the form completely and accurately as possible.

Make one copy of the original for your records.

**EX-PARTE DOCKET PROCEDURE**

1:15 pm courtroom doors are opened

Place documents in the bin at the clerk's station

1:30 pm docket begins

The Clerk will advise you when your waiver has been reviewed

3:30 pm docket ends

**AFTER YOUR WAIVER IS REVIEWED:**

A deputy clerk will file all your original documents to start the action, provide you with a case number and date stamp the top page of one set of copies for you to have served

**OR**

If your request is denied, you will be required to pay the full filing fee at the time you file your original documents. Acceptable forms of payment are cash, credit/debit card, cashier's check or money order made payable to the Benton County Clerk. Personal checks are not accepted.

You should bring 2 sets of extra copies of your documents when you are filing. One set for your records and the 2<sup>nd</sup> set for serving on the responding party.

<b>SUPERIOR Court of Washington</b> <b>For BENTON COUNTY</b>
<hr/> Petitioner/Plaintiff, vs. <hr/> Respondent/Defendant.

No. \_\_\_\_\_

**Motion and Declaration for Waiver of Civil Fees and Surcharges (MTWVF)**

**Motion and Declaration for Waiver of Civil Fees and Surcharges**

**I. Motion**

- 1.1 I am the  petitioner/plaintiff  respondent/defendant in this action.
- 1.2 I am asking for a waiver of fees and surcharges under GR 34.

**II. Basis for Motion**

- 2.1 GR 34 allows the court to waive “fees or surcharges the payment of which is a condition precedent to a litigant’s ability to secure access to judicial relief” for a person who is indigent. As outlined below, I am indigent.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Requesting Party

\_\_\_\_\_  
Print or Type Name

**III. Declaration**

I declare that,

- 3.1 I cannot afford to meet my necessary household living expenses and pay the fees and surcharges imposed by the court. Please see the attached Financial Statement, which I incorporate as part of this declaration.
- 3.2 In addition to the information in the financial statement, I would like the court to consider the following:

\_\_\_\_\_

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(Check if applies.) I filed this motion by mail. I enclosed a self-addressed stamped envelope with the motion so that I can receive a copy of the order once it is signed.

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at (city) \_\_\_\_\_, (state) \_\_\_\_\_ on (date) \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or Type Name

Case Name: \_\_\_\_\_ Case Number: \_\_\_\_\_

<b>Financial Statement (Attachment)</b>			
1. My name is:			
2. <input type="checkbox"/> I provide support to people who live with me: How many?      Age(s):			
<b>3. My Monthly Income:</b>		<b>6. My Monthly Household Expenses:</b>	
Employed <input type="checkbox"/> Unemployed <input type="checkbox"/>		Rent/Mortgage:	\$
Employer's Name:		Food/Household Supplies:	\$
Gross pay per month (salary or hourly pay):	\$	Utilities:	\$
Take home pay per month:	\$	Transportation:	\$
<b>4. Other Sources of Income Per Month in my Household:</b>		Ordered Maintenance actually paid:	\$
Source:	\$	Ordered Child Support actually paid:	\$
Source:	\$	Clothing:	\$
Source:	\$	Child Care:	\$
Source:	\$	Education Expenses:	\$
Sub-Total:		Insurance (car, health):	\$
<input type="checkbox"/> I receive food stamps.		Medical Expenses:	\$
<b>Total Income, lines 3 (take home pay) and 4:</b>		Sub-Total:	<b>\$</b>
<b>5. My Household Assets:</b>		<b>7. My Other Monthly Household Expenses:</b>	
Cash on hand:	\$		\$
Checking Account Balance:	\$		\$
Savings Account Balance:	\$		\$
Auto #1 (Value less loan):	\$		\$
Auto #2 (Value less loan):	\$	Sub-Total:	<b>\$</b>
Home (Value less mortgage):	\$	<b>8. My Other Debts with Monthly Payments:</b>	
Other:	\$		\$ /mo
Other:	\$		\$ /mo
Other:	\$		\$ /mo
Other:	\$		\$ /mo
Other:	\$	Sub-Total:	\$
<b>Total Household Assets:</b>		<b>Total Household Expenses and Debts, lines 6, 7, and 8:</b>	<b>\$</b>
<b>Date:</b>		<b>Signature:</b>	

<b>SUPERIOR Court of Washington</b> <b>For BENTON COUNTY</b>
<hr/> Petitioner/Plaintiff, vs. <hr/> Respondent/Defendant.

No. \_\_\_\_\_

**Order Re Waiver of Civil Fees and Surcharges**

- Granted (ORPRFP)**
- Denied (ORDYMT)**
- Clerk's Action Required 3.1**

**Order Re Waiver of Civil Fees and Surcharges**

**I. Basis**

The court received the motion to waive fees and surcharges filed by or on behalf of the  
 petitioner/plaintiff  respondent/defendant.

**II. Findings**

The Court reviewed the motion and supporting declaration(s). Based on the declaration(s) and any relevant records and files, the Court finds:

- 2.1  The moving party is indigent based on the following: They:
- are represented by a qualified legal aid provider that screened and found the applicant eligible for free civil legal aid services; and/or
  - receive benefits from one or more needs-based, means-tested assistance programs; and/or
  - have household income at or below 125% of the federal poverty guideline; and/or
  - have household income above 125% of the federal poverty guideline but cannot meet basic household living expenses and pay the fees and/or surcharges; and/or
  - other: \_\_\_\_\_

- \_\_\_\_\_
- \_\_\_\_\_
- 2.2  The moving party is not indigent.
- 2.3  Other: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**III. Order**

Based on the findings the court orders:

- 3.1  The motion is granted, and
- all fees and surcharges the payment of which is a condition precedent to the moving party's ability to secure access to judicial relief are waived.
- other: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- 3.2  The motion is denied.

Dated: \_\_\_\_\_

\_\_\_\_\_  
**Judge/Commissioner**

Presented by:

\_\_\_\_\_  
 Signature of Party or Lawyer/WSBA No.

\_\_\_\_\_  
 Print or Type Name                      Date