IN THE CIRCUIT COURT OF THE STATE OF OREGON FOR THE COUNTY OF _____ **Case No.** _____ Plaintiff/Petitioner **Application & Declaration for** v. **Deferral or Waiver of Fees for:** ☐ Plaintiff/Petitioner Defendant/Respondent ☐ Defendant/Respondent ACCESS TO THIS DOCUMENT IS RESTRICTED TO PROTECT THE PRIVACY OF PARTIES I am asking for deferral or waiver of fees in this case because I am unable to pay all or part of the fees right now. I understand that I must complete the **Declaration for Deferral or Waiver** of Fees to prove to the court that I do not have enough money to pay the fees. I understand that if I do not, my request can be denied. 1. I am applying for deferral or waiver of the following fees (check ONE box ONLY): ☐ Filing Fees + Sheriff's Service Fee* ☐ Motion Fee ☐ Filing Fees ☐ Arbitration Fee ☐ Trial Fee \square Other (describe): *If you are requesting deferral or waiver of the sheriff's service fee, explain why you cannot find another person to serve the papers. Papers can be served by any competent person who is at least 18 years old, a resident of Oregon (or the state where service is made), and who is not a party to the case or a party's lawyer, employee, officer, or director. 2. If the court <u>defers</u> fees, I understand that: a. The fees are a debt I owe to the State of Oregon, and the court may put me on a payment plan. I agree to pay the fees according to the payment plan. If I fail to do so, the total amount of unpaid fees will be referred for collection. b. The court will enter a judgment against me for the unpaid amount of the fees that are deferred, and the judgment will be enforced regardless of the outcome of the case. c. If the court refers this judgment for collection, administrative and collection costs will automatically be added to the judgment without further notice to me or further action by the court. 3. I understand that if the clerk denies my application, I have the right to ask a judge to review my application.

Fee Deferral or Waiver Application and Declaration (eForm: 11/9/12) Page 1 of 5

Case No: _____

	<u>Declara</u>	<u>tion</u>				
1. PERSONAL						
Full Name of Applicant: First Name		Middle Name		Last Name		
		widdle ivanic		Last Name		
Residence Address:Street Address		City	State	Zip		
Mailing Address (if different):		City				
Phone:	Date of Birth (montn/day/ye	ear)			
Marital Status:	*SSN:		DL/ID:			
*I am providing my Social Security nur denied consideration solely for failure employment information, and for colle	e to provide it. It n	nay be used to	verify my identif	I to provide it or be ication, credit and		
Names and ages of legal depende						
Name	Age	Name		Age		
		_				
2. PUBLIC ASSISTANCE (include I am now receiving assistance from Food Stamps (SNAP-Supple Supplemental Security Inco Temporary Assistance to No Oregon Health Plan (OHP) (If you checked any of the boxes above	the following pro- emental Nutrition ome (SSI) - \$ eedy Families (TA	grams (<i>check o</i> Assistance Pro NF) - \$	all that apply): ogram) - \$			
3. EMPLOYMENT AND INCOME Your Employment and Income Currently Employed □ Not Currently Employ	<u>come</u>	low long since	last employmen	t?		
Employer Name (use previous employer	er if not currently	employed)				
Employer Address	•					
Occupation (job title)	Length of Emp	lovment	 Last Pavche	ck \$		
Wages/salary \$per_				т		
Monthly Income: Gross (before taxes) \$ Net (after taxes) \$ (If you are employed, you must show proof of your income. See Instructions.)						
(1) you are employed, you must show	proof of your thee	inte. See msti	uctions.)			
Household Members' Emp	nlovment and I	icome				
Name and relationship to you: Currently Employed ☐Not Curren	tly Employed H	ow long since l	last employment	t?		
Employer Name (use previous employer	er if not currently	employed)				
Employer Address						
Occupation (job title)						
Wages/salary \$per_				т		
Monthly Income: Gross (before taxes)						
From the first t	Ψ		αχευ <i>)</i> ψ			
Any other income for you, amounts listed in Section 2 (Socia assistance, child support, workers' con Fee Deferral or Waiver Application and	l Security, food sta npensation, disabi	amps, unemplo lity, tribal ben	oyment, retirem	ddition to ent, public		
Page 2 of 5	u Deciaration (er	лш. 11/9/12)	Case	e No:		

Source of Income (describe)	Amount How long received? How often?					
☐ Additional Page Attached		Ф				
Other Party's Employ	ment and Income	e (if known to	uou)			
Currently Employed Not Cu	rrently Employed	How long sind	e last emplo	yment?		
Occupation (job title) Week Monthly Income:	Wages/salar	y \$	per _		Hours Per	
Week Monthly Income	: \$ [] gross (before	tax) 🗌 net	(after taxes	s)	
4. MONTHLY LIVING EXPE Home	NSES (Total: \$_)			
Rent/mortgage \$	Food \$		Trash	\$		
rtone, moregage ¢	1 σσα φ		Traon	Ψ		
Utilities						
Electric \$	Gas \$		Water	\$		
Sewer \$	Phone \$		Cell \$			
Cable \$	Internet \$					
T						
Transportation Vehicle payments \$	Insurance \$	<i>I</i>	nth Gas \$			
Bus \$	Parking \$	/mon	ith Gas \$			
Dus \$	raikiiig \$					
Other						
Credit cards \$	Student loans \$	<u> </u>	Court	Court fines \$		
Medical \$	Child support \$			(describe)		
(You must show proof of the c						
Any other individuals who he Relationship	elp pay your living Amount		ayment for w	/hat?		
5. MONEY ON HAND / IN BA Cash \$	NK					
Checking Account #	Bank/Credit Union			Balance \$		
Savings Account #	Bank/Credit Union			Balance \$		
			Balance \$			
6. VEHICLES						
Year, Make, and Model	Value Amo \$\$\$			•		
	\$	\$				
- DEAL ECTATE						
7. REAL ESTATE Address (include city and state)	Piirchase	Purchase	Value	Amount	Payments	
address (include city and state)	Year	Price	v arut	Owed		
			\$	\$	2	
			T			
Fee Deferral or Waiver Application	n and Declaration (e	eForm: 11/9/1	(2)	Cogo No.		
Page 3 of 5				Case No:		

		\$	\$	\$	
8. ALL OTHER PRO	OPERTY OR ASSETS (suc			guns, jewelr	y, livestock, etc.):
Description	Value		scription		Value
	\$				
	\$				\$
	\$				\$
9. LIQUIDATION O If you are unable to se	F ASSETS ll or liquidate your assets, ex	plain why:			
10. MONEY OWED Name of Debtor Owing	TO YOU BY OTHERS (ta	x refunds, j	_	rust funds, s	
			\$		
□No □ Ye	ING TEMPORARY CHILES (How much? \$MATION YOU WANT CO			L SUPPOR'	Г?
Have you paid	for do you plan to) to repress your lawyer money? No contingency fee agreement	Yes (H	ow much? \$)
☐ I chose this form fo ☐ A legal help organiz ☐ I paid (or will pay) I hereby declare t	ment Preparation. Checker myself and completed it we cation helped me choose or described by the choose or described by the choose of the categories of the	ithout paid complete th for help cho	help. is form, but osing, comp	leting, or rev best of my	viewing this form. y knowledge
3 1					
Date	Signature of App	plicant (Plaintiff/Petit	ioner 🗌 Def	endant/Respondent)
	Name of Applica	ant (printe	d or typed)		
Fee Deferral or Waive	r Application and Declaratio	n (eForm:	11/9/12)		

INSTRUCTIONS FOR FEE DEFERRAL OR WAIVER APPLICATION & DECLARATION

Fees and costs are required in any civil case, including dissolutions (divorce), small claims, evictions (FED – Forcible Entry and Detainer), and arbitration. A list of fees is available at www.courts.oregon.gov or from the court clerk. The court accepts cash, credit and debit cards, and money orders or checks made out to the State of Oregon. If you cannot afford to pay the amount required, you may ask the court to defer or waive those fees and costs. If the court defers the fees and costs you do not need to pay them at the time of filing. You still have to pay according to the schedule set up by the court.

If you want to apply for a deferral or waiver of fees, complete the following forms:

The **case heading** must be the same as on the papers you filed or received

APPLICATION & DECLARATION FOR DEFERRAL OR WAIVER OF FEES.

Fill in the case heading and mark whether you are the Plaintiff/Petitioner or Defendant/Respondent. You must <u>completely</u> fill out the Declaration. Do not leave any sections blank. Date, sign, and print your name. This document is kept confidential (only court staff will see it, not the other party).

ORDER REGARDING DEFERRAL OR WAIVER OF FEES.

Fill in the case heading and mark whether you are the Plaintiff/Petitioner or Defendant/Respondent. The judge or designated court staff will complete the rest of the form.

You must show proof of income and monthly bills (including rent and utilities) for the past two months. If you claim to be eligible for public assistance, you *must* show proof of the amount you receive from all programs. Once the forms are complete, bring them to court. You will appear before a judge or other court staff.

At the end of your case, fee deferrals may be addressed again if any amount is still unpaid. The judge will review the situation and decide whether the fees should be waived. At that time, you will have to update your information.

Note: Court-specific instructions may be attached.

Tips for completing the Declaration:

- ➤ Complete EVERY entry enter "N/A" for "Not Applicable" if it does not apply to you.
- ➤ ONLY enter payments that you are legally required to make for yourself or your dependents. If you are paying any expenses for a child who is not your legal dependent, a parent, or anyone else, do NOT include those payments in your *Declaration*.
- > "DL/ID" is your Driver's License or identification number.
- > "Transportation" includes bus passes, parking fees, etc.
- > "Vehicle payments" and "Insurance" include <u>all</u> vehicles that you are currently making payments on (cars, trucks, motorcycles, scooters, bicycles, etc.).
- ➤ "Liquidation of assets" if you sold your valuable possessions, how much would you get?
- > A contingency fee agreement means that your lawyer gets paid part of any judgment or award that you get in this case.

Fee Deferral or Waiver Application and Declaration (eForm: 11/9/12)		
Page 5 of 5	Case No:	