APPLICATION FOR
FURTHER DEFERRAL OR WAIVER of FEES and COSTS
(in all cases except criminal)

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1

To Apply to Further Defer or Waive Court Fees and/or Costs
(at the end of the case)

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GNF9 - 5312 - 0612

SELF-SERVICE CENTER

FURTHER DEFERRAL and/or WAIVER OF COURT FEES AND/OR COSTS CHECKLIST

You may use the forms and instructions in this packet if ***. . .***

- ✓ Your case has ended and you have received a notice from the court telling you how much you owe and when you must pay the money if you do not file a ***"Supplemental Application for Further Deferral and/or Waiver"*** *(this packet)****.***

- ✓ Your case is a family (domestic relations), civil, probate, mental health, juvenile, or tax court case, **AND**

- ✓ You understand "further deferred" means to delay the date the payment is due or to lower the payments by making the payment period longer, and "waived" means you will **never** have to pay your fees and/or costs ***IF*** you qualify), **AND**

- ✓ You want to request your court fees and/or costs be further deferred or waived.

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READ ME: Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Self-Service Center website at www.superiorcourt.maricopa.gov/SSC

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FURTHER DEFERRAL OR WAIVER OF FEES AND/OR COSTS IN ALL CASES EXCEPT CRIMINAL CASES

This packet contains court forms and instructions to request further deferral or waiver of fees and/or costs in all cases **except criminal** cases. The documents should appear in the following order:

Order	File Number	Title	# Pages
1	GNF9k	Checklist: *You may use these forms if . . .*	1
2	GNF9t	Table of Contents (this page)	1
3	GNF92h	Instructions: How to Apply For Further Deferral or Waiver of Court Fees and Costs	2
4	GNF92f	***"Supplemental Application for Further Deferral or Waiver of Court Fees and/or Costs"***	3
5	GNF97f	***"Order on Supplemental Application*** *(Without Hearing)**"***	2

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INSTRUCTIONS: HOW TO APPLY FOR FURTHER DEFERRAL (a payment plan) OR WAIVER OF COURT FEES AND COSTS

USE THIS PACKET only if you have a court order that defers your court fees and costs **and** you have received a notice from the court telling you that you must now pay your court fees and costs or file a Supplemental Application to have your court fees waived or further deferred.

1. WHAT COURT FEES OR COSTS ARE CHARGED? Arizona law requires the court to charge fees and costs when a court user files certain court papers or needs other court services. There are various fees and costs charged for different kinds of cases, depending on what you want or need to do. If this packet applies to you, you have asked the court to defer your court fees and costs and the court has done so. You will have received a notice from the court that you must now pay your court fees and/or costs, or file a Supplemental Application to further defer or waive your fees and costs.

2. WHO PAYS THE COURT FEES AND COSTS? Usually the person who wants to file a certain court document, or who wants a certain court service, must pay the fees and costs at the time the filing or the service is done. At the end of the court case the judge might order that one or the other party pay all the costs and fees, which means the party who is ordered to do so must pay back the other party who already paid court fees or costs.

3. WHAT ABOUT A PARTY WHO CANNOT PAY COURT FEES OR COSTS? Sometimes, or very serious reasons, a party cannot pay court fees and costs at the time of filing court papers or asking for another court service. If this happens, the party can apply for a DEFERRAL or WAIVER of court costs and fees at the beginning of the case. If this packet applies to you, you will have already received a deferral at the beginning of the case.

- A **WAIVER** means that the party does not have financial resources to pay now, and probably cannot do so in the future. Generally, waivers are only given at the end of a case. The only time you can get a waiver at the beginning of a case is if you are filing for an Order of Protection, or an Injunction Against Harassment.

- A **DEFERRAL** means that although the party cannot pay now, he or she can probably pay in the future. Because you can probably pay in the future, most often, you will get a DEFERRAL rather than a WAIVER, because everyone needs to bear his or her fair share of the court fees and costs. If at the end of your case, you meet the financial criteria and still cannot pay your court fees, you can ask the court to waive or further defer your court fees and costs. If the court defers the court fees and costs, you will be put on a payment plan and required to pay a certain amount of money to the court each month.

4. PAPERWORK FOR FURTHER DEFERRAL OR WAIVER OF COURT FEES AND COSTS:

A. SUPPLEMENTAL APPLICATION FOR WAIVER OR FURTHER DEFERRAL OF COURT FEES AND/OR COSTS: You must file the Supplemental Application with the Clerk of the Court. You should know that if the court does not waive or further defer the court fees and costs, and if you do not pay the court fees and costs a Consent Judgment will be signed by the Judge and recorded against you. If you disagree with the court's decision regarding the Supplemental Application, you can request a hearing. The hearing forms are contained in this packet, too. In filling out the Application, check the boxes that apply to your situation as follows:

- ☐ Paragraph 1. Read paragraph 1(A) to see if you receive any governmental assistance. If you do check the box that applies to your situation and then go directly to the end of the last page and date and sign the Application in front of the clerk or notary public. If you do not receive governmental assistance, go to paragraph 1(B).

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☐ Paragraph 1(B). Read paragraph 1(B) to see if you believe your income is insufficient or is barely sufficient to meet the daily essentials of life. If you do, check the box and then fill out the Financial Questionnaire. If your income is sufficient to meet the daily essentials of life, go to paragraph 2.

☐ Paragraph 2. Read paragraph 2 if paragraph 1(A) and 1(B) do not apply to you. Then explain to the court why you do not have the money to pay your court fees and costs now. Then fill out the Financial Questionnaire.

B. ORDER ON SUPPLEMENTAL APPLICATION (WITHOUT HEARING): Do not fill out this form except for the caption which includes the name of the petitioner/plaintiff, name of the respondent/ defendant and your case number. The Special Commissioner will fill out this form after he or she has reviewed your application. This form tells you whether your costs have been waived, further deferred or denied. If you do not agree with the decision of the Special Commissioner, ask the Special Commissioner for the Request for Hearing form and the Order on Supplemental Application (After Hearing).

5. HOW DO I APPLY FOR FURTHER DEFERRAL or WAIVER?

A. Complete the Supplemental Application and the caption of the Order on Supplemental Application (without hearing). You must personally appear at the court if you are asking the court to waive your court fees and costs unless it will be an extraordinary hardship for you to do so. For example, you live outside the Phoenix Metropolitan area, or you are confined to your home due to illness, and so forth. If you are asking for a further deferral (payment plan), you can mail your Supplemental Application to the court

B. Take the Supplemental Application to the Clerk of Court at the court location where you filed your court papers originally on or before the date you were told to file the Supplemental Application. If you are mailing the Supplemental Application, mail it to the Clerk of the Court, 201 West Jefferson, Phoenix, Arizona 85003. Make sure the Supplemental Application gets to the Clerk of the Court on or before the date you were told to file the Supplemental Application. The Special Commissioner will review your application, determine if you qualify for further deferral or waiver, and notify you whether you qualify for further deferral or waiver.

C. If your court fees and costs are **waived**, that means you **never** have to pay the court fees and costs. If your court fees and costs are further **deferred** that means that you will be put on a **payment plan**, and you will need to pay the court a certain amount each month or a consent judgment will be signed against you. If you do not agree with the court's decision, you can request a hearing in front of a judge. Ask the Special Commissioner for the form Request for Hearing and Order.

6. OTHER HELP. If you still have questions about this procedure, you can ask a lawyer for legal advice. You can look up a lawyer in the telephone book under "attorneys." Also, the Self-Service Center has a list of lawyers who will help you help yourself. The list shows where the lawyers are located, how much they charge to look over the court papers or answer your questions, and what their experience is. Visit the Self-Service Center at the Courthouse to get the names of some lawyers on the list or go to the Internet at www.superiorcourt.maricopa.gov/SuperiorCourt/Self-ServiceCenter/

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Name of Person Filing Document: _____
Your Address: _____
Your City, State, and Zip Code: _____
Your Telephone Number: _____
Attorney Bar Number (if applicable): _____
Representing ☐ Self (Without Attorney) OR ☐ Attorney for ☐ Petitioner OR ☐ Respondent

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

_____
Name of Petitioner/Plaintiff

Case Number:_____

_____
Name of Respondent/Defendant

SUPPLEMENTAL APPLICATION FOR FURTHER DEFERRAL OR WAIVER OF COURT FEES AND/OR COSTS

STATE OF ARIZONA)
COUNTY OF MARICOPA) SS

STATEMENTS MADE TO THE COURT UNDER OATH OR AFFIRMATION. I swear or affirm that the information in this application is true and correct. I make this statement under the penalty of prosecution for perjury if it is determined that I did not tell the truth.

1. I am requesting a further deferral or waiver of any unpaid fees and costs in my case.

The basis for the request is:

1. ☐ WAIVER:
a. ☐ I am permanently unable to pay. My income and liquid assets are insufficient or barely sufficient to meet the daily essentials of life and unlikely to change in the foreseeable future.
b. ☐ I receive government assistance from the federal program Supplemental Security Income (SSI).

OR

2. ☐ FURTHER DEFERRAL:
a. ☐ I receive governmental assistance from the state/federal program(s) checked below:
☐ Temporary Assistance for Needy Families (TANF) ☐ Food Stamps

OR

b. ☐ My income is insufficient or is barely sufficient to meet the daily essentials of life, and includes no allotment that could be budgeted for the fees and costs that are required to gain access to the court.

NOTE: To determine whether income is insufficient or barely sufficient, the court will review your income and expenses. Among the factors the court may consider are:

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Case No. _____

1. Whether your gross income as computed on a monthly basis is 150% or less of the current federal poverty level. Gross monthly income includes your share of community property income if available to you.

2. Although your income is greater than 150% of the poverty level, you have proof of extraordinary expenses, including medical expenses, costs of care for elderly or disabled family members or other expenses that the court finds are extraordinary and that reduce your gross monthly income to at or below 150% of the poverty level.

OR

c. ☐ I do not have the money to pay court filing fees and/or costs now.
I can pay the filing fees and/or costs at a later date. Explain:_____

_____

_____

_____

You must complete the Financial Questionnaire. You must submit proof that you receive governmental assistance. If you are submitting this application by mail or a third party, you must attach a photocopy of that proof.

FINANCIAL QUESTIONNAIRE

SUPPORT RESPONSIBILITIES: List all persons you support (including those for whom you pay child support and/or spousal maintenance/support):

NAME	RELATIONSHIP

STATEMENT OF INCOME AND EXPENSES

ASSISTANCE: I receive assistance from:

☐ Arizona Health Care Cost Containment System (AHCCCS)
☐ Arizona Long Term Care System (ALTUS)
☐ Other (explain):

MONTHLY INCOME: My monthly income is:

Monthly gross income: $_____
Employer name:_____
Employer address:_____
Employed since (month/year):_____
Other current monthly income, including spousal Maintenance/support, retirement, rental, interest, pensions, scholarships, grants, royalties, lottery winnings (explain amount and source): $_____

_____

_____

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Case No. _____

My spouse's monthly gross income (if available to me): $_____
TOTAL MONTHLY INCOME: $_____

MONTHLY EXPENSES AND DEBTS: My monthly expenses and debts are:

	PAYMENT AMOUNT	LOAN BALANCE
Rent/Mortgage payment	$_____	$_____
Car Payment	$_____	$_____
Credit Card Payments	$_____	$_____
Other payments and debts	$_____	$_____
Explain:_____		
Food/Household supplies	$_____	
Utilities/Telephone	$ _____	
Clothing	$_____	
Medical/Dental/Drugs	$_____	
Health Insurance	$_____	
Nursing care	$_____	
Laundry	$_____	
Child Support	$_____	
Child Care	$_____	
Spousal Maintenance	$_____	
Car Insurance	$_____	
Gasoline/Bus Fare	$_____	
Contributions to Employer or Other Retirement Account	$_____	
TOTAL MONTHLY PAYMENTS		$_____

STATEMENT OF ASSETS: List only those assets available to you and accessible without financial penalty. Equity is defined as market value minus any liens or loans.

	ESTIMATED VALUE
Cash and Bank Accounts	$_____
Credit Union Accounts	$_____
Equity in:	
1. Home	$_____
2. Other property	$_____
3. Cars/other vehicles	$_____
Other, including stocks, bonds, etc.	$_____
Retirement Accounts	$_____
TOTAL ASSETS:	$_____

EXTRAORDINARY EXPENSES: For example, unusual medical needs, financial hardship, costs of care of elderly or disabled family members. (Proof must be submitted.)

DESCRIPTION	AMOUNT
_____	$_____
_____	$_____
TOTAL EXTRAORDINARY EXPENSES:	$_____

SIGNATURE UNDER PENALTY OF PERJURY

Today's Date:_____ Signature:_____

Print your Name:_____

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SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY

_____
Name of Petitioner/Plaintiff

Case Number:_____

ORDER ON SUPPLEMENTAL APPLICATION (WITHOUT HEARING)

_____
Name of Respondent/Defendant

A SUPPLEMENTAL APPLICATION WAS FILED

THE COURT FINDS that the applicant (print name) _____:

☐ **IS ELIGIBLE FOR A WAIVER** because

☐ The applicant is permanently unable to pay.

☐ The court exercises its discretion to grant a waiver as necessary and appropriate. (ARS §12-302(L))

OR

☐ **IS ELIGIBLE FOR FURTHER DEFERRAL** of fees and costs. **(Court must establish a schedule of payments.)**

☐ The applicant has shown good cause for further deferral.

☐ The court exercises its discretion to grant a further deferral as necessary and appropriate. (ARS §12-302(L))

OR

☐ **IS NOT ELIGIBLE FOR A WAIVER OR FURTHER DEFERRAL** of fees and costs.

IT IS ORDERED: (Check all boxes that apply)

☐ **WAIVER IS GRANTED** for unpaid fees and/or costs in the amount of $_____.

☐ **WAIVER IS DENIED**. The applicant does not meet the financial criteria for waiver because:

_____
A waiver MUST BE granted upon proof the applicant is permanently unable to pay..

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Case No. _____

☐ **FURTHER DEFERRAL IS GRANTED** for unpaid fees and costs in the amount of $_____.

☐ The applicant shall pay the entire amount due by _____ (date).

OR

☐ The applicant shall pay $_____ each _____ (week, month etc.) until paid in full, beginning _____.

☐ **FURTHER DEFERRAL DENIED** because the applicant has not demonstrated good cause or it is not necessary and appropriate under A.R.S. §12-302(L).

☐ **APPLICATION DENIED:**
Your application is incomplete because: _____
_____

You are encouraged to submit a complete application before a consent judgment is entered against you.

RIGHT TO HEARING. Unless a waiver is granted, you may request a hearing for a review of this order. The request must be made within twenty (20) days of the day this order was mailed or handed to you in court. No action for non-payment of fees and costs will be held until the hearing is held.

If you do NOT request a hearing, full payment is due within twenty (20) days from the day this order was mailed or handed to you in court. If full payment is not made within the time stated, a consent judgment may be entered against you for any amounts unpaid.

DATED: _____

_____
☐ Judicial Officer
☐ Special Commissioner

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