

**APPLICATION FOR  
 WAIVER OF FEES  
 CIVIL, HOUSING, SMALL CLAIMS**

JD-CV-120 Rev. 10-13  
 C.G.S. §§ 52-259, 52-259b, 52-259c  
 P.B. § 8-2; P.A. 13-310

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
 www.jud.ct.gov

**Instructions to person asking to have the fees  
 waived (applicant)**

1. Print or type all information requested.
2. Sign the Financial Affidavit section in front of a court clerk, a notary public or an attorney.
3. Bring this form to the superior court where your case will be filed or is pending.
4. If your application for fees payable to the court or for costs of service of process is denied, you may ask for a hearing on the application.

**Instructions to Clerk**

1. Bring completed form to a judge.
2. If the application is granted, notify the applicant.
3. If the application for fees payable to the court or for costs of service of process is denied, and upon the request of the applicant, schedule a hearing on the application.

Note - This form will be put in the public file.

**To: The Superior Court**

Name of case	Docket number (If applicable)
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<input type="checkbox"/> Judicial District <input type="checkbox"/> Housing Session <input type="checkbox"/> Geographical Area Number <input type="checkbox"/> Small Claims	Address of court
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Name of applicant (Last, first, middle initial)	Address of applicant (Number, street, town, state and zip)	Telephone (Area code first)
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Type of proceeding

Civil case (Regular docket)   
  Small claims case   
  Summary Process/Landlord-Tenant case  
 Motion to Open, Set Aside, Modify or Extend Civil Judgment   
 Other (Specify): \_\_\_\_\_

**Fee Waiver**

I ask that the court order that I do not have to pay fees or order the State to pay the fees below. (Check all that apply)

Entry fee (Regular docket)   
  Entry fee (Small Claims)   
 Filing fee   
 Service of Process (delivery of papers)   
 Other fee (Specify): \_\_\_\_\_

**Financial Affidavit**

**1. Dependents**

Total number of dependents (not including yourself)

**2. Monthly Income**

A. Gross monthly income (before deductions)

B. Net monthly income after taxes from monthly employment

C. Other income (for example, TANF, Social Security, etc.) (Specify source)

Source: \_\_\_\_\_

**Total Monthly Income (B+C)\***

**3. Monthly Expenses**

A. Rent/Mortgage

B. Real Estate Taxes

C. Utilities (Telephone, heat, electric, water, gas, etc.)

D. Food

E. Clothing

F. Insurance Premiums (Medical/Dental, Auto, Life, Home)

G. Medical/Dental

H. Transportation (bus, gasoline, etc.)

I. Child Care

J. Other (Specify):

**Total Monthly Expenses\***

**4. Assets**

Estimated Value	Loan Balance	Equity
A. Real Estate		Real Estate
B. Motor Vehicles		Motor Vehicle
C. Other Personal Property (for example, jewelry, furniture, etc.)		Other Property
D. Savings Account Balance (Total of all accounts)		Savings
E. Checking Account Balance (Total of all accounts)		Checking
F. Cash		Cash
G. Other Assets (Specify):		Other Assets

**Total Assets**

**5. Liabilities/Debts (for example, credit card balances, loans, etc. Do not include mortgage or loan balances that are listed under "Assets".)**

Type of Debt	Amount Owed	Monthly Payment
<b>Total Liabilities</b>		

\*If you claim zero Total Monthly Income or Expenses, explain how you are supported:

I certify that the information on page 1 is true and accurate to the best of my knowledge and that I can, if asked, document all income, expenses, and liabilities listed on page 1.

**Notice** ▶

***Any false statement made by you under oath which you do not believe to be true and which is intended to mislead a public servant in the performance of his or her official function may be punishable by a fine and/or imprisonment.***

Signed ( <i>Applicant</i> )	Print name of person signing at left	Date signed
Subscribed and sworn to before me:	On ( <i>Date</i> )	Signed ( <i>Notary Public, Commissioner of the Superior Court, Assistant Clerk</i> )

**Order**

Having reviewed the application, the court finds as follows:

- 1. The applicant is indigent and unable to pay the following fees which are waived:
  - Entry fee (*Regular docket*)     Entry fee (*Small Claims*)     Filing fee
  - Other fee (*Specify*): \_\_\_\_\_
- 2. The applicant is indigent and unable to pay the cost of service. A state marshal's fee not to exceed \$ \_\_\_\_\_ shall be paid by the state.
- 3. The applicant is indigent but able to pay fees and costs of service and the application is denied.
- 4. The applicant is not indigent and the application is denied.
- 5. Denied: the applicant has repeatedly filed actions with respect to the same or similar matters, such filings establish an extended pattern of frivolous filings that have been without merit, the application sought is in connection with an action before the court that is consistent with the applicant's previous pattern of frivolous filings, and the granting of such application would constitute a flagrant misuse of Judicial Branch resources.
- 6. Denied. Other (*Specify*): \_\_\_\_\_

By the Court ( <i>Print or type name of Judge</i> )	On ( <i>Date</i> )	Signed ( <i>Judge, Clerk</i> )	Date signed
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**Request For Hearing On Denied Application**

This section should be filled out only if the court has checked #3, 4, 5 or 6 above and denied the application.

- I request a court hearing on my application.

▶ \_\_\_\_\_ Date signed \_\_\_\_\_

*Signed (Applicant)*

**Hearing to be held at the Court location shown on page 1 on the date and time shown below:**

Hearing on ( <i>Date</i> )	At ( <i>Time</i> )	Room number	Signed ( <i>Clerk</i> )
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**Order After Hearing**

Having reviewed the application, the court finds as follows:

- 1. The applicant is indigent and unable to pay the following fees which are waived:
  - Entry fee (*Regular docket*)     Entry fee (*Small Claims*)     Filing fee
  - Other fee (*Specify*): \_\_\_\_\_
- 2. The applicant is indigent and unable to pay the cost of service. A state marshal's fee not to exceed \$ \_\_\_\_\_ shall be paid by the state.
- 3. The applicant is indigent but able to pay fees and costs of service and the application is denied.
- 4. The applicant is not indigent and the application is denied.
- 5. Denied: the applicant has repeatedly filed actions with respect to the same or similar matters, such filings establish an extended pattern of frivolous filings that have been without merit, the application sought is in connection with an action before the court that is consistent with the applicant's previous pattern of frivolous filings, and the granting of such application would constitute a flagrant misuse of Judicial Branch resources.
- 6. Denied. Other (*Specify*): \_\_\_\_\_

By the Court ( <i>Print or type name of Judge</i> )	On ( <i>Date</i> )	Signed ( <i>Judge, Clerk</i> )	Date signed
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