



How to Ask the Court to Waive Fees

Note: Use this form to ask the Court to let you file your papers with the court without having to pay a fee.

If the judge approves your fee waiver, it will be kept in your file. Sometimes a clerk may not see the fee waiver and may charge you to file your papers. You can remind the clerk of your fee waiver and ask them to check your file.

These instructions and form may not be right for your case. They can't take the place of advice from a lawyer. Talk to a lawyer if you have **any** questions.

Do not change this form. If you change the form, the Court may say you have to pay the fees when you should not have to pay.

What Words Do I Need to Know?



Filing Fee – There is a cost to file papers with the Court. This is called a filing fee. The fee is not the same in every case.

Fee Waiver – If you can not afford to pay the Filing Fee, you can ask the Court to allow you to file your papers without paying the fee. Use this form to ask the court to let you file without paying the fee. A Fee Waiver is also sometimes called a Filing Fee Waiver, Affidavit for Inability to Pay Filing Fees, an In Forma Pauperis Affidavit, or a Statement of Inability to Pay Court Costs and Fees.

Who Can Use the Form?

You can use the form if:

- You can't afford to pay the fee to file your papers with the court.
- You want to ask a Montana court to waive the filing fee

When Should I File this Form?

You will want to file this form before you file any other paperwork in your case. If you've been served with a lawsuit, it is a good idea to file this form 2-3 days **before** your deadline to file a written Answer or Response. That will give you some time to file your Answer or Response after the Judge makes a decision on your request to waive the Filing Fee.

IMPORTANT: You cannot use this form to get out of paying a money judgment that's been issued against you. If you have questions, you should ask a lawyer.

How Do I Use the Form?

1 Fill in the Form

- Fill in the blanks on the form.
 - You will need to provide your name, address and phone number. If you want to keep your address or phone number confidential for safety reasons, write in “confidential.” Be sure to provide another address where you can receive court notices (such as a domestic violence shelter or a post office box).
 - Check the box for which court is handling your case and write in the name of that court in the blank.
 - Write in the names of the Petitioner and Respondent or the Plaintiff and Defendant on the lines that are provided. You can look at court documents from your case to see if you are the Petitioner, Respondent, Plaintiff, or Defendant. If you are the person starting a lawsuit, you are either the Petitioner or Plaintiff.
 - Follow the rest of the instructions written on the form to know which blanks to fill in.
- Sign the form. Above your signature, fill in the date, and city and state where you signed the form.
- On the **Order Regarding Statement of Inability to Pay Court Costs** form, you will fill in only the caption. The judge will fill out the rest of the order. The caption looks like this:

MONTANA _____ JUDICIAL DISTRICT COURT, _____ COUNTY
 IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MONTANA
 IN THE MUNICIPAL OR CITY COURT OF _____, MONTANA

<p>_____, Petitioner / Plaintiff,</p> <p>and</p> <p>_____, Respondent / Defendant.</p>	<p>Case No: _____ <i>(leave blank, the clerk will write in)</i></p> <p>Order Regarding Statement of Inability to Pay Court Costs</p>
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(Please continue to the next page for more instructions for the form.)

2 Make a Copy

- Make at least one copy of the form for yourself. Keep the copy in a safe place.

3 File the Forms at the Office of the Clerk of Court

- Go to the office of the clerk of court for the court where you want to file the papers.
- File your original **Statement of Inability to Pay Court Costs and Fees**.
- Give the **Order Regarding Statement of Inability to Pay Court Costs** to the clerk. Ask the clerk to “lodge” the Order in the file. “Lodging” means that the clerk will not officially file the document in your court file, but will just keep the Order inside the court file so the judge can look at it in the future.



Where Can I Get Legal Help?

These organizations may be able to help you:

- **Montana Legal Services Association (MLSA)** gives free legal help to low income people. To find out if you qualify for MLSA, apply online at www.MontanaLawHelp.org or call the MLSA HelpLine at 1-800-666-6899.
- **The State Bar Lawyer Referral and Information Service (LRIS)** refers people to Montana lawyers who might be able to help. The referral is free. Call LRIS at 1-406-449-6577, or go to montanabar.org >> For the Public >> Lawyer Referral.
- **The State Law Library** can help you find and use legal resources such as books, forms, and websites. You can visit the Law Library website at courts.mt.gov/library. Or you can contact a Reference Librarian at 1-406-444-3636 or by email at mtlawlibrary@mt.gov.
- **Self Help Law Centers** located throughout the state are able to assist you in finding additional legal and court information. For a complete list of self help services by area visit: <http://courts.mt.gov/selfhelp>.

Name

Mailing Address

City State Zip Code

Phone Number

E-mail Address (optional)

Petitioner/Plaintiff Respondent/Defendant

MONTANA _____ JUDICIAL DISTRICT COURT, _____ COUNTY

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MONTANA

IN THE MUNICIPAL OR CITY COURT OF _____, MONTANA

Petitioner / Plaintiff,

and

Respondent / Defendant.

Case No: _____
(leave blank, the clerk will write in)

Statement of Inability to Pay Court Costs and Fees

I have a good cause of action or defense but am unable to pay filing or other court fees. I request the court waive the costs and fees. I provide the following information.

My full legal name is: _____ . I was born in this month _____ and this year _____ .

I am represented by an entity that provides free legal services to low-income persons.

Or

I am represented by a volunteer/pro bono attorney, and am financially eligible for free legal services. (Attach a certificate of eligibility from legal aid organization to this form.)

Or

I receive one or more of these benefits: (Check the box for each benefit you receive.)

SNAP TANF SSI Medicaid WIC LIEAP

If you checked any one of the three boxes above, skip to the end of this form, and sign the declaration on page 4. You don't need to fill out the remainder of the form.

If you did not check a box above, you may still qualify for a fee waiver. Please continue to fill out pages 2 through 4 of this form so the court has the information it needs to decide if you qualify for the fee waiver.

I. INCOME(Complete this Section to the best of your ability.)

What do you do for work? _____

Who is your employer? _____

What is your household's annual income, before taxes? _____ How many people are in your household? ____ (The tables below will help you answer these questions, if you are not sure what to put in the blanks.)

If you are unemployed, when were you last employed (Month, Year)? _____ Your job? _____

Are you married? Yes No Separated Getting Divorced **NOTE:** If you are not married, if you and your spouse are separated, or if one of you is filing for dissolution of marriage, you do not need to provide your spouse's income below.

Fill in the chart below with the income received by you, and by your spouse, if applicable. Put a "0" in each blank if you or your spouse don't receive the income listed.

Income Sources	Amount YOU receive per month before taxes	Amount YOUR SPOUSE receives per month before taxes
Employment	\$	\$
Retirement/Pension	\$	\$
Workers' Compensation	\$	\$
Social Security	\$	\$
Unemployment	\$	\$
Government Benefits	\$	\$
Child Support Received	\$	\$
A person or agency pays my rent or other monthly expenses and the amount is: _____	\$	\$
Other Income—e.g., rental income, stocks, investments, etc.—describe: _____	\$	\$
Total here:	\$	\$

What is your household size? How many persons, if any, depend on you financially? If none, then write "N/A" below. Attach another page if needed and check here to tell the court you attached another page:

Dependents (Initials Only) Age		Relationship to You
1.		
2.		
3.		
4.		
5.		

II. ASSETS (Complete this Section to the best of your ability.)

What property do you and your spouse own? Include your spouse's property if you are married and not separated and not filing for dissolution. Fill in the chart below, only listing items that you could sell for \$600 or more. If you don't own an item listed, write "N/A" in the "Value" column for that item. "Value" means the total amount the item(s) identified in a column would sell for, minus the amount you still owe on the item(s), if anything.

Asset	Value
Cash (This includes the money in your savings and checking accounts)	\$
Vehicle 1: provide year, make and model _____	\$
Vehicle 2: provide year, make and model _____	\$
Home where you live now	\$
Real estate or other homes/mobile homes (Not including the home you are living in now)	\$
Recreational vehicle(s) such as snowmobile, ATV, camper/RV, boat, motorcycle, etc.	\$
Guns or other collections	\$
Other Item(s) worth more than \$600—describe: _____	\$

III. DEBTS AND EXTRAORDINARY EXPENSES (Complete this Section to the best of your ability.)
What bills do you and your spouse pay each month? Fill in the chart below.

Monthly Expenses	Value
Housing Expense: Mortgage or Rent	\$
General Household Expenses: Utilities, Phone/Internet/Cable, etc.	\$
Insurance Expenses, Healthcare Costs and/or Medical Debt(s)	\$
Childcare Expenses	\$
Other Extraordinary Expenses: e.g., Collection actions, Student Loans—describe:	\$

IV. ADDITIONAL INFORMATION *(This Section is optional.)*

If you have additional information that you want the court to consider about your inability to pay court costs, write that information under your signature below or attach an extra page. Check here if you attached another page:

V. DECLARATION *(This Section is Required.)*

I declare under penalty of perjury and under the laws of the State of Montana that the information in this document is true and correct. I understand that it is a crime to give false information in this document.

Date: _____ City: _____ State: _____

YOUR Signature: _____
Court Use Only

MONTANA _____ JUDICIAL DISTRICT COURT, _____ COUNTY
 IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MONTANA
 IN THE MUNICIPAL OR CITY COURT OF _____, MONTANA

<p>_____, Petitioner / Plaintiff, and _____, Respondent / Defendant.</p>	<p>Case No: _____ <i>(leave blank, the clerk will write in)</i></p> <p>Order Regarding Statement of Inability to Pay Court Costs</p>
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***Warning! Read carefully the section checked below.
It is a court order.***

- Waiver of court costs is **Granted**. Declarant shall proceed without payment of court fees or costs.
- Temporary Waiver of court costs is **Granted**. Declarant may file without payment of court fees or costs, but the Court may determine at a later time that the declarant has the ability to pay all fees or costs and will require declarant to do so.
- Temporary Waiver of fees is **Granted**. Declarant may file without payment of court fees or costs, but must appear before the Court at _____ a.m/p.m. on the _____ day of _____ and show cause why the declarant lacks the ability to pay all fees or costs.

Warning! If this third box is checked, you must come to court on the date ordered above. If you don't come, the judge will deny your request to waive court costs, and you will have to pay the court costs.

Waiver of Fees and costs is **Denied**. Waiver is denied based on the following:

Ordered this _____ day of _____, 20_____.

Presiding Judge