

IN THE _____ COURT OF _____ COUNTY, WEST VIRGINIA

Case No. _____

Plaintiff or Petitioner v. _____
Defendant or Respondent

**FINANCIAL AFFIDAVIT AND APPLICATION:
ELIGIBILITY FOR WAIVER OF FEES, COSTS, OR SECURITY IN A CIVIL OR DOMESTIC CASE
OR FOR COSTS ASSOCIATED WITH
REQUIRED POLYGRAPH EXAMINATION OR ELECTRONIC MONITORING**

A. Information for the Applicant:

1. You will be allowed to file and carry on your civil proceeding without giving security or paying fees or costs that would otherwise be required, if the court finds that you meet the official financial guidelines.
2. You must complete the affidavit for the court to determine if the costs of either a polygraph examination, required by *W.Va. Code § 62-11D-2*, or electronic monitoring, required by *W.Va. Code § 62-11D-3*, will be paid by the supervising entity.
3. You must file a separate affidavit and application anytime your financial situation no longer meets the official guidelines or anytime the court orders you to do so.
4. You must attach a copy of your most recent salary stub, W-2 form, or other financial documentation (with all social security numbers and all dates of birth removed [*you can black them out*]) that verifies your income. Without the attached documentation, your application will be incomplete and not considered.
5. At any time you may request or the court may require review of your eligibility for a waiver; and at any time the court may require you to pay fees or costs previously waived or to pay future fees or costs.
6. When you sign this form, you will have to swear or affirm that you have completely and truthfully provided all information sought, to the best of your knowledge and ability. *If you knowingly give any incomplete and/or false information, you may be prosecuted for the crime of false swearing.*
7. The information you give in this form will be confidential only in a domestic violence or a divorce case.
8. Except for signatures, all information must be clearly printed.

B. Information about You and Your Case:

1a. Name: _____ 1b. Telephone Number: _____

1c. Address: _____

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2. Describe what is involved in your case:

3a. Do you have a lawyer? Yes No

b. Have you paid or will you have to pay your lawyer? Yes No

c. Will you have to pay your lawyer only if you win? Yes No

4. Check if seeking waiver for:

Cost of required polygraph examination (*W.Va. Code § 62-11D-2*); and/or

Cost of required electronic monitoring (*W.Va. Code § 62-11D-3*).

C. Information about Your Financial Situation:

1a. What is your current yearly net (take-home) income from all sources:

Employer:	\$	Second Job:	\$	Self-Employment:	\$
Public Assistance:	\$	Food Stamps:	\$	Unemployment:	\$
Benefits:	\$	Disability Benefits:	\$	Social Security/SSI:	\$
Alimony:	\$	Pensions:	\$	Rental Income:	\$
Interest:	\$	Dividends:	\$	Annuities:	\$
Odd Jobs:	\$	Other:	\$	(specify):	
YEARLY TOTAL: \$					

Please remember to attach financial documents which verify this information.

1b. If your listed income is zero (0), please explain below and attach some verification (i.e. DHHR or food stamp information):

2a. List the names and relationships to you of all the persons supported by this income, whether or not they are household members (provided, that these persons can be claimed as dependents on your federal tax return):

2b. What is the total number of dependents, including yourself? _____

3. How much money do you, individually or jointly, have in cash, checking and savings accounts, deposit certificates, and/or bonds (liquid assets)? \$ _____

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4a. List your regular **monthly** household debt-payment and other expenses:

Mortgage/Rent:	\$	Car Payment:	\$	Loan Payments:	\$
Credit Card Payments:	\$	Other Debt Payments:	\$	Utilities:	\$
Cell Phone:	\$	Food:	\$	Child Care:	\$
Child Support:	\$	Alimony:	\$	Medical Bills:	\$
Other Expenses:	\$	(specify):			

4b. What is the total amount of these monthly expenses? \$ _____

5a. List all cars, trucks, motorcycles, or recreational vehicles (all-terrain vehicles, motor homes, snowmobiles, boats), including their make, model, and year, that you own, individually or jointly:

5b. What is the total value of these items less any amount owed? \$ _____

6a. List all real estate (houses, lots, land, rental property, other commercial property) that you, individually or jointly, own.

6b. What is the total value of these items less any amount owed? \$ _____

7. What would the consequences be for you if a waiver of fees, costs, or security is denied?

8. This application consists of three (3) pages and _____ pages of supporting financial documents.

By signing my name on this form, I swear to or affirm: (1) the completeness and truthfulness, to the best of my ability and knowledge, of the information I have provided and (2) my belief that I have a right to a waiver.

Signature of Affiant-Applicant: _____

Taken, subscribed, and sworn or affirmed before me, by the person whose signature appears above, on this _____ day of _____, 20____, in _____ County, West Virginia.

Signature of Notary (Clerk or Deputy Clerk): _____

For Court Use Only

The affiant's application for a waiver is (clerk: initial one) _____ granted _____ denied.

Date: _____ Signature of Clerk or Deputy: _____

FINANCIAL GUIDELINES WORKSHEET

(FOR INITIAL DETERMINATION OF ELIGIBILITY FOR WAIVER OF FEE OR COST: CIVIL CASE)

AFFIDAVIT LINE C1 (NET INCOME): _____

AFFIDAVIT LINE C2b (NUMBER OF DEPENDENTS) _____

GUIDELINES INCOME CHART _____ DEPENDENTS, \$ _____ INCOME

(IF LINE C1 IS MORE THAN INCOME CHART AMOUNT; APPLICANT IS NOT ELIGIBLE, STOP:
THE STEPS BELOW NEED NOT BE COMPLETED.)

AFFIDAVIT LINE C3 (LIQUID ASSETS) \$ _____

AFFIDAVIT LINE C4B (MONTHLY EXPENSES) \$ _____

(IF THE AMOUNT IN THE BOX IN LINE C3 IS NOT LESS THAN LINE C4B, APPLICANT IS NOT
ELIGIBLE. STOP: THE STEPS BELOW NEED NOT BE COMPLETED.)

AFFIDAVIT LINE C5B (COLLIATERAL ASSETS) \$ _____

(IF LINE C5B IS MORE THAN THE INCOME CHART AMOUNT IN ITEM 3,
APPLICANT IS NOT ELIGIBLE-EVEN IF THE APPLIANT MEETS THE INCOME & LIQUID ASSETS
VERSUS MONTHLY EXPENSE GUIDELINES.)