

**IN THE CIRCUIT/COUNTY COURT OF THE _____ JUDICIAL
CIRCUIT IN AND FOR _____ COUNTY, FLORIDA**

CASE NO.:

IN RE: The Guardianship of

_____,
a person.
_____ /

APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS

1. **I have _____ dependents.** (Include only those persons you list on your U.S. Income tax return.)

Are you Married?...Yes.....No Does your Spouse Work?...Yes.....No Annual Spouse Income? \$ _____

2. **I have a net income of \$ _____** paid () weekly () every two weeks () semi-monthly () monthly () yearly () other _____.
(Net income is your total income including salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, **minus** deductions required by law and other court-ordered payments such as child support.)

3. **I have other income** paid () weekly () every two weeks () semi-monthly () monthly () yearly () other _____.
(Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

Second Job.....	Yes \$ _____	No _____	Veterans' benefit.....	Yes \$ _____	No _____
Social Security benefits	Yes \$ _____	No _____	Workers compensation.....	Yes \$ _____	No _____
For you.....	Yes \$ _____	No _____	Income from absent family members.....	Yes \$ _____	No _____
For child(ren).....	Yes \$ _____	No _____	Stocks/bonds.....	Yes \$ _____	No _____
Unemployment compensation	Yes \$ _____	No _____	Rental Income.....	Yes \$ _____	No _____
Union payments.....	Yes \$ _____	No _____	Dividends or interest.....	Yes \$ _____	No _____
Retirement/pensions	Yes \$ _____	No _____	Other kinds of income not on the list.....	Yes \$ _____	No _____
Trusts.....	Yes \$ _____	No _____	Gifts.....	Yes \$ _____	No _____

4. **I have other assets:** (Circle "yes" and fill in the value of the property, otherwise circle "No")

Cash.....	Yes \$ _____	No _____	Savings account.....	Yes \$ _____	No _____
Bank account(s).....	Yes \$ _____	No _____	Stocks/bonds.....	Yes \$ _____	No _____
Certificates of deposit or			Homestead Real Property*.....	Yes \$ _____	No _____
Money market accounts.....	Yes \$ _____	No _____	Motor Vehicle*.....	Yes \$ _____	No _____
Boats*.....	Yes \$ _____	No _____	Non-homestead real property/real estate*.....	Yes \$ _____	No _____

Show loans on these assets in paragraph 5

Check one: I () DO () DO NOT expect to receive more assets in the near future. The assets is _____.

5. **I have total liabilities and debts of \$ _____** as follows: Motor Vehicle \$ _____, Home \$ _____, Other Real Property \$ _____, Child Support paid direct \$ _____, Credit Cards \$ _____, Medical Bills \$ _____, Cost of Medicines (monthly) \$ _____, Other \$ _____.

6. **I have a private lawyer in this case** Yes No

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under §57.082, F.S. commits a misdemeanor of the first degree, punishable as provided in §775.082, F.S. or §775.083, F.S. I attest that the information I have provided on this application is true and accurate to the best of my knowledge.

Signed this ___ day of _____, 20___

Date of Birth Driver's License or ID Number

Signature of Applicant for Indigent Status o/b/o _____
Print Full Legal Name: _____
Phone Number: _____

Address, P O Box, Street, City, State, Zip Code

CLERK'S DETERMINATION

Based on the information in this Application, I have determined the applicant to be () Indigent () Not Indigent, according to §57.082, F.S.

Dated this _____ day of _____, 20___ . Clerk of the Circuit Court by _____

This form was completed with the assistance of: _____
Clerk/Deputy Clerk/Other authorized person.

APPLICANTS FOUND NOT TO BE INDIGENT MAY SEEK REVIEW BY A JUDGE BY ASKING FOR A HEARING TIME.
THERE IS NO FEE FOR THIS REVIEW. Sign here if you want the judge to review the clerk's decision _____.