

## REQUEST FOR WAIVER OR REDUCTION OF THE ARBITRATION FILING FEE

I, \_\_\_\_\_, am the person asking for arbitration in a fee dispute now under consideration, and I request the San Diego County Bar Association to waive the arbitration-filing fee.

### SECTION I: PERSONAL INFORMATION

**APPLICANT:**

**PRESENT SPOUSE:**

Name \_\_\_\_\_

Name \_\_\_\_\_

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

**EMPLOYER:**

**EMPLOYER:**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Number of dependents ( or persons living in household): \_\_\_\_\_

NAME	AGE	RELATIONSHIP	GROSS MONTHLY INCOME

## SECTION II: INCOME AND ASSETS

In support of my request, I declare that I cannot afford to pay the filing fee. My present assets, income, and expenses are:

<b>PART A: GROSS MONTHLY INCOME</b>
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	<u>Applicant</u>	<u>Spouse</u>
Salary and wages (including commissions, bonuses, and overtime)	\$ _____	_____
Pensions and /or retirement benefits	_____	_____
Social Security	_____	_____
Medical Insurance	_____	_____
Disability and unemployment insurance	_____	_____
Public Assistance (Welfare, AFDC payments, etc.)	_____	_____
Child/Spousal support	_____	_____
Dividends and interest	_____	_____
All other sources (for example, etc.)	_____	_____
<b>TOTAL GROSS MONTHLY INCOME</b>	<b>\$ _____</b>	<b>\$ _____</b>

<b>PART B: MONTHLY ITEMIZED DEDUCTIONS FROM GROSS INCOME</b>
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	<u>Applicant</u>	<u>Spouse</u>
Income taxed (state and federal)	_____	_____
Social Security	_____	_____
Unemployment insurance	_____	_____
Medical or other insurance	_____	_____
Union or other dues	_____	_____
Retirement or pension fund	_____	_____
Savings plan	_____	_____
Other (specify)	_____	_____
<b>TOTAL DEDUCTIONS</b>	<b>\$ _____</b>	<b>\$ _____</b>

<b>PART C: ASSETS</b>
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	<u>Applicant</u>	<u>Spouse</u>
Savings Accounts	_____	_____
Checking Accounts (or similar type accounts)	_____	_____
Credit Union	_____	_____
Value of Bonds and/or Stocks	_____	_____
Home	_____	_____
Furniture	_____	_____
Auto/Truck (Make & Year _____)	_____	_____
Other vehicles	_____	_____
Other real estate	_____	_____
Other assets	_____	_____
<b>TOTAL ASSETS</b>	<b>_____</b>	<b>_____</b>

## SECTION III: EXPENSES

<b>PART A: EXPENSES</b>
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	Applicant	Spouse
___ Rent or ___ Mortgage (check one)	_____	_____
Property Taxes/Property Insurance	_____	_____
Property Maintenance	_____	_____
Food	_____	_____
Laundry/Cleaning	_____	_____
Clothes	_____	_____
Entertainment	_____	_____
Transportation & Auto expenses (Insurance, gas, repairs, etc.)	_____	_____
Utilities	_____	_____
Household Supplies	_____	_____
Medical/Dental (not reimbursed by insurance)	_____	_____
Child Care	_____	_____
Education	_____	_____
Other expenses (specify) _____	_____	_____
_____	_____	_____
Installment Payments (from Part B below)	_____	_____
<b>TOTAL EXPENSES</b>	_____	_____

<b>PART B: INSTALLMENT PAYMENTS</b>
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	Monthly Payment	Balance
Creditor _____	_____	_____
Purpose of debt _____	_____	_____
Creditor _____	_____	_____
Creditor _____	_____	_____
Purpose of debt _____	_____	_____
Creditor _____	_____	_____
Purpose of debt _____	_____	_____
Creditor _____	_____	_____
Purpose of debt _____	_____	_____
<b>TOTAL INSTALLMENT PAYMENTS (Enter in Part A above)</b>	_____	_____

**IF YOUR MONTHLY EXPENSES EXCEED YOUR MONTHLY INCOME, YOU MUST ATTACH AN EXPLANATION OF HOW YOU ARE MEETING THE MONTHLY EXPENSES.**

I declare under penalty of perjury under the laws of the State of California that the above information true and correct and that this declaration was executed on: \_\_\_\_\_ at \_\_\_\_\_.

(Date) (City/State)

Signature: \_\_\_\_\_

# **INSTRUCTIONS FOR COMPLETING REQUEST FOR WAIVER OF THE ARBITRATION FILING FEE**

These instructions have been prepared to assist you in completing the enclosed **REQUEST FOR WAIVER OF THE ARIBTRATION FILING FEE** form.

## **SECTION I: PERSONAL INFORMATION**

Please enter your name, occupation, employer, and number of dependents. List the names of your dependents. List the names of your dependents (do not list yourself in this section), their ages, relationship to you (e.g. mother, father, or son) and gross monthly income as outlined. If you are divorced, do not list your ex-spouse or any of his/her financial information on this application.

## **SECTION II: INCOME AND ASSETS**

**Part A: Gross Monthly Income** – List all monthly income before deductions, no matter where it is coming from (e.g., unemployment, disability payment, etc.).

If you have received a settlement in your case, any money received should be listed as an asset in Section 11, Part C.

**Part B: Itemized Deductions from Gross Income**- List ALL money that is deducted from the gross income listed above (e.g. federal and state taxes, FICA, SDI, etc.).

**Part C: Assets**- List the value of ALL items you own, including savings and checking accounts, your home, all automobiles, boats, motorcycles, rental property, other real estate, jewelry, etc.

## **SECTION III: EXPENSES**

**Part A: Expenses**- List ALL your monthly expenses. Do not include installment payments, but include the total from Part B below. This includes rent or mortgage payments (please indicate which type of payment you are making), utilities including telephone, water, garbage and electricity, medical and dental expenses, etc.

**Part B: Installments Payments** – List ALL your credit card payments, car payments, loan payments, etc. Total there figures up and carry them up to the last line, installment Payments, on Part A: Expenses. Do not include mortgage payment for the house you are living in. If you own other property please list those mortgage payments here.

**IF YOUR TOTAL EXPENSES ARE LARGER THAN YOUR MONTHLY INCOME, YOU MUST INCLUDE AN EXPLANATION OF HOW YOU ARE MEETING YOUR MONTHLY EXPENSES.**

You are signing the fee waiver request form under penalty of perjury.

You may be contacted if further clarification is required.

### **IF YOUR FILING FEES ARE WAIVED OR REDUCED:**

If the proceeding results in an Award in your favor ordering payment of any amount to you by the other party, the Award will provide that first payment be made by the opposing party to the San Diego County Bar Association to reimburse the Association for the fees waived or unpaid which otherwise would have been paid by you in this matter.