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| <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="text-align: right; margin-bottom: 5px;">Court of Washington</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="text-align: right; margin-bottom: 5px;">Petitioner,</div> <div style="text-align: center; margin-bottom: 5px;">vs.</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="text-align: right;">Respondent.</div> | <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div>No.</div> <div>Motion and Declaration For Waiver of Filing Fees and Surcharges - Harassment</div> <div>(MTWVF)</div> <div>(RCW 10.14.060; RCW 10.14.055)</div> |
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I. Motion

- 1.1 I am the petitioner in this action.
- 1.2 I am asking for a waiver of all filing fees and surcharges.

II. Basis for Motion

- 2.1 ☐ GR 34 allows the court to waive “filing fees or surcharges the payment of which is a condition precedent to a litigant's ability to secure access to judicial relief” for a person who is indigent. RCW 10.14.060 provides that if the petitioner’s request for fee waiver is granted, “then no fees for service may be charged to the petitioner.” As outlined below, I am indigent.
- 2.2 ☐ RCW 10.14.055 allows the court to waive “filing fees or surcharges the payment of which is a condition precedent to a litigant's ability to secure access to judicial relief” for a person who is seeking relief from a person:
 - ☐ who has stalked them as that term is defined in RCW 9A.46.110; or
 - ☐ who has engaged in conduct that would constitute a sex offense as defined in RCW 9A.44.130; or
 - ☐ from a person who is a family or household member as defined in RCW 26.50.010 who has engaged in conduct that would constitute domestic violence as defined in RCW 26.50.010.

RCW 10.14.060 provides that if the petitioner's request for fee waiver is granted, "then no fees for service may be charged to the petitioner."

Dated: _____

Signature of Requesting Party

Print or Type Name

III. Declaration

I declare that,

3.1 ☐ I cannot afford to meet my necessary household living expenses and pay the filing fees and surcharges imposed by the court. Please see the attached Financial Statement, which I incorporate as part of this declaration.

☐ In addition to the information in the financial statement I would like the court to consider the following:

_____.

3.2 ☐ I am seeking protection from the respondent who:

☐ has stalked me, or the minor child(ren) listed in the petition;

☐ has engaged in conduct that would constitute a sex offense as defined in RCW 9A.44.130; or

☐ is a family or household member as defined in RCW 26.50.010 who has engaged in conduct that would constitute domestic violence as defined in RCW 26.50.010;

 as described in the Statement in the Petition for Order for Protection – Harassment.

☐ (Check if applies.) I filed this motion by mail. I enclosed a self-addressed stamped envelope with the motion so that I can receive a copy of the order once it is signed.

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at (city) _____, (state) _____ on (date) _____.

Signature

Print or Type Name

Case Name: _____ Case Number: _____

| Financial Statement - Harassment (Attachment) | | | |
|--|----|---|--------|
| 1. My name is: | | | |
| 2. <input type="checkbox"/> I provide support to people who live with me: How many? Age(s): | | | |
| 3. My Monthly Income: | | 6. My Monthly Household Expenses: | |
| Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> | | Rent/Mortgage: | \$ |
| Employer's Name: | | Food/Household Supplies: | \$ |
| Gross pay per month (salary or hourly pay): | \$ | Utilities: | \$ |
| Take home pay per month: | \$ | Transportation: | \$ |
| 4. Other Sources of Income Per Month in my Household: | | Ordered Maintenance actually paid: | \$ |
| Source: | \$ | Ordered Child Support actually paid: | \$ |
| Source: | \$ | Clothing: | \$ |
| Source: | \$ | Child Care: | \$ |
| Source: | \$ | Education Expenses: | \$ |
| Sub-Total: | | Insurance (car, health): | \$ |
| <input type="checkbox"/> I receive food stamps. | | Medical Expenses: | \$ |
| Total Income, lines 3 (take home pay) and 4: | | Sub-Total: | \$ |
| 5. My Household Assets: | | 7. My Other Monthly Household Expenses: | |
| Cash on hand: | \$ | | \$ |
| Checking Account Balance: | \$ | | \$ |
| Savings Account Balance: | \$ | | \$ |
| Auto #1 (Value less loan): | \$ | | \$ |
| Auto #2 (Value less loan): | \$ | Sub-Total: | \$ |
| Home (Value less mortgage): | \$ | 8. My Other Debts with Monthly Payments: | |
| Other: | \$ | | \$ /mo |
| Other: | \$ | | \$ /mo |
| Other: | \$ | | \$ /mo |
| Other: | \$ | | \$ /mo |
| Other: | \$ | Sub-Total: | \$ |
| Total Household Assets: | | Total Household Expenses and Debts, lines 6, 7, and 8: | |
| \$ | | \$ | |
| Date: | | Signature: | |