FEE WAIVER REQUEST TO REGISTRAR, CLERK OR SHERIFF

Before you begin

- Be sure that you have the right form. You must use a different form if you're making a request to the court, or if you're a litigation guardian.
- Read through the form and make sure you have the documents you'll need to attach to prove your income (see financial information on page 2).
- For more information about fee waivers and instructions on filling out this form, ask for a guide in your local courthouse or visit <u>ontario.ca/courts</u>.

Your personal information				
Full legal name		City or town	Province	
Phone number	Fax number	Mailing address		
()	()			
Email address				

Case Information				
Title of proceeding or name of case				
Court file or claim number		Court/office locatio	n	
Where is this fee waiver request being made?				
Court of Appeal	Divisional Court		Superior Court of Justice	
Family Court Small Claims Co		ourt	Ontario Court of Justice	
Enforcement Office				
Will you or any of your witnesses need a court interpreter for a language other than English or French?				
Yes (check any that apply)	🗌 No			
For myself				
For any witnesses				

Eligibility				
Are your court or enforcement fees being paid by a lawyer under a contingency fee agreement?				
In a contingency fee agreement, you and your lawyer would have agreed that you will only pay if the case is successful.				
🗌 Yes	No			
\rightarrow If you answered yes to this question, you are not eligible for a fee waiver and should not complete the rest of this form.				
Are you receiving services from Legal Aid Ontario for this case?				
🗌 Yes	No			
\rightarrow If you answered yes to this question, you are eligible for a fee waiver. Skip to the Swearing or Affirming this Document section below.				



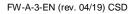
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ls you	ur main source o	of household income from one	or more of the follo	owing?		
 Income assistance from Ontario Works Income support from the Ontario Disability Support Program 						
	Family Benefits . Old Age Security	<i>Act</i> allowance y Pension and the Guarantee	d Income Suppleme	ant		
•	War Veterans A	llowance				
• (Canada Pensior	n Plan benefits				
	es	🗌 No				
		to this question, skip to the Fina				
How	many people are	e in your household, including	you, your spouse,	and any dependent	children?	
1	[2 3	4	<u> </u>	or more	
What	is your gross ar	nnual household income?				
This is	s the total amount	of money that all of the members	s in your household m	nake in a year, before	taxes or deductions.	
			Your income	Your spouse's income	Other household members' income	
	-	oss annual income (for	\$	\$	\$	
	each person)	ed gross annual household	· ·	•	•	
	Total (estimated gross annual household income)					
Is the	total amount of	your household's liquid asset	ts less than \$2,600?	?		
This is	s the total amount o	of liquid assets owned by member	rs of your household th	at are money or can e	asily be converted into n	noney, such as
stocks	stocks, bonds, RRSPs that are not locked in, or GICs.					
⊡ Ye	Yes No					
Is your household's net worth less than \$10,500?						
This is the value of all assets owned by the members of your household, minus the amount of all their debts and other financial liabilities.						
Yes No						
		Fi	nancial informa	ation		
Attack	Attach one of the following proof of income documents for each of you and your spouse. Indicate below which you have provided.				ave provided.	
	If you and your spouse are currently living apart and no longer in a relationship, you do not have to provide information and				•	
documents for them.						
Y	ou Spouse					
income tax return or notice of assessment for the most recent tax year						
	most recent statement of earnings from your employer or your three most recent pay stubs					
	most recent statement of income showing income from employment insurance, social					
assistance, a pension, workers compensation or disability payments.						
OR						
If you aren't able to provide the court with proof of income documents, please explain why and fill out the table below.						



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Fill out the table below, estimating the gross amount of annual income that you and your spouse received in the last year from each of the listed sources.

If you and your spouse are currently living apart and no longer in a relationship, you do not have to provide information for them.

	Your income	Your spouse's income	Other household members' income
Employment	\$	\$	\$
Pension	\$	\$	\$
Dividends	\$	\$	\$
Interest	\$	\$	\$
Support received (child and spousal)	\$	\$	\$
Other (please specify):	\$	\$	\$
Estimated gross annual income (for each person)	\$	\$	\$
Total (estimated gross annual household income)	\$		

Swearing or affirming this document

Before you can finish your fee waiver application, you have to swear or affirm that the information you've provided is accurate. You can get your form sworn or affirmed at the court or enforcement office at no cost. You can also have your form sworn or affirmed by a notary public or someone else who is authorized to commission documents. **That person will fill out this section.**

It is an offence under the Criminal Code to knowingly swear a false affidavit.

I swear/affirm that this information is accurate to the best of my knowledge and belief. I agree to provide financial information and records, if requested, to confirm the information in this form.

SWORN/AFFIRMED BEFORE ME

at

(city or town) on

(signature of requestor)

COMMISSIONER FOR TAKING AFFIDAVITS (or as may be)

For office use only				
Requestor is eligible for fee waiver under the <i>Administration of Justice Act</i> , R.S.O. 1990, c. A.6:	Requestor has provided required proof of income documents:			
Yes No	☐ Yes: ☐ No			
(Date of signature)	(Signature of registrar, clerk of the court or sheriff)			

Personal information contained on this form is collected under the authority of ss. 4.3, 4.5 and 4.6 of the *Administration of Justice Act*, R.S.O. 1990, c. A.6. This information will be used to determine fee waiver eligibility. By signing this form, you agree to provide supporting financial documentation and records if requested to do so by the Ministry of the Attorney General, which would be used to confirm the information you provide in this form. If you have any questions regarding the collection of personal information for fee waiver requests, please contact the Operational Support Branch, Ministry of the Attorney General, 720 Bay Street, 2nd floor, Toronto, ON M7A 2S9, (416) 326-5364.



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(date).