



INSTRUCTIONS FOR CLERK'S FEE WAIVER

If you are unable to afford to pay a Clerk's fee(s) in your court case, you may request a waiver. In determining whether a fee waiver request is approved, the Clerk will consider your ability to pay based on the submission of a completed and signed Affidavit in Support of Fee Waiver Request.

To complete the Affidavit:

1. Write in the parties names (Plaintiff/Petitioner vs Defendant/Respondent).
2. Add the Case Number.
3. Below the case number, check one or more of the types of fee waiver you are requesting.
4. Clearly print your name on the line provided.
5. Check the box that best supports your eligibility for requesting a fee waiver (See below). Attach your supporting document as required.
6. Sign and date the document.

Fee Waiver Eligibility Verification Requirements:

Benefit Award Letter: You are currently receiving assistance under a needs-based, means-tested assistance program such as the following:

- Federal Temporary Assistance for Needy Families (TANF)
- State-provided general assistance for unemployable individuals (GA-U or GA-X)
- Federal Supplemental Security Income (SSI)
- Federal poverty-related veteran's benefits
- Food Stamp Program (FSP)

Financial Declaration Form: Your family income is less than 125% of the Federal Poverty Standard (see below).

Family Size	1	2	3	4	5	6	7	8	9 or more
Maximum Monthly Income*	\$1,569	\$2,129	\$2,690	\$3,250	\$3,810	\$4,371	\$4,931	\$5,492	Add \$560 for each additional person
Maximum Annual Income*	\$18,825	\$25,550	\$32,275	\$39,000	\$45,725	\$52,450	\$59,175	\$65,900	Add \$6,725 for each additional person

*"Income" means net income received, after taxes and childcare costs are deducted.

Court Order Waiving Fees: You have a court order waiving filing fees and surcharges in this case which is valid until the case is closed or in family law cases until the current cause of action is resolved.

Return Completed Waiver Request or fill out the form online. Here are the options:

Online – KC Script Portal (Preferred Method):

Go to this website:

<https://dja-prd-ecexap1.kingcounty.gov/?q=Home>

For instructions on how to request a Fee Waiver through our KC Script Portal, click here:

<https://kingcounty.gov/en/dept/dja/courts-jails-legal-system/case-records/records-access/portal-instructions>

In-person: return completed request and supporting documentation to the Clerk’s Office Cashiers 8:30 am – 4:30 pm, Monday to Friday (limited service between 12:15 – 1:15 pm) (address below)

By mail: mail completed request form and supporting documentation to either location to:

Regional Justice Center
Attn: Clerks Office
401 Fourth Avenue North Room 2C
Kent, WA 98032-4429

King County Superior Court
Attn: Clerks Office
516 Third Avenue Room E609
Seattle, WA 98104-2386

If you are unable to come submit your request and supporting documentation, please call 206-296-9300 for assistance.

A Clerk’s fee waiver includes the following services:

- Ex Parte via the Clerk Presentation
- Copies of filed documents
- Issuance of documents by the clerk
- Copies of recorded hearings

e-working copies submissions are not included in the Clerk’s fee waiver.

For additional information on submitting working copies without a fee visit the court’s website:

<https://kingcounty.gov/en/court/superior-court/about-superior-court/judges-staff/judges/delivering-documents>

Superior Court of Washington for King County

Plaintiff/Petitioner

Vs.

Defendant/Respondent

Case No. _____

Affidavit in Support of Clerk's

Fee Waiver Request

I, _____ (name), declare under penalty of perjury that:

- I have attached a copy of my valid benefits award letter from a Washington State Agency, or from any United States governmental agency; OR
- I have attached a true, accurate and complete Financial Declaration; OR
- I have received an Order from the Court waiving my filing fees and surcharges in the above-mentioned case.

Signed this _____ day of _____, 20____.

Signature of Requester

Mailing address: _____

Phone: _____ eMail: _____

For DJA staff use only

Affiant's identity verified by: _____

Fee Waiver Request approved on _____ **OR**

Fee Waiver Request denied on _____

For the following reason:

1. My name is:	
2. My spouse/partner/room-mate's name is:	
3. Self	3. Spouse/partner/room-mate
Employer Name:	Employer Name:
Employer Address:	Employer Address:
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Gross pay/month: \$	Gross pay/month: \$
Number of hours worked per week:	Number of hours worked per week:
If unemployed, date of last employment:	If unemployed, date of last employment:
4. My Other Income Per Month	4. Spouse/partner/room-mate Other Income
Public Assistance \$	Public Assistance \$
Unemployment Compensation \$	Unemployment Compensation \$
Industrial Insurance (L&I) \$	Industrial Insurance (L&I) \$
Child Support Received \$	Child Support Received \$
Gifts \$	Gifts \$
Social Security \$	Social Security \$
Investment Income \$	Investment Income \$
Legal Settlements \$	Legal Settlements \$
Other Monthly Receipts \$	Other Monthly Receipts \$
5. The Following People Live With Me	
List name, age and relationship of ALL persons living in your household	
6. My Asset and Equity Values are:	
Home: \$	Cash: \$
Checking Account: \$	Retirement: \$
Savings Account(s): \$	Other (list):\$
Auto(s) + make/yr: \$	
	Total \$

Reviewed by: _____

Date: _____