|  |  |  |
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| STATE OF SOUTH CAROLINA | ) |  IN THE COURT OF COMMON PLEAS |
|  | ) | FOR THE       JUDICIAL CIRCUIT |
| COUNTY OF      | ) |  |
|  | ) |  |
|  | ) |  |
|       | ) | **APPLICATION FOR WAIVER OF** **PAYMENT OF NEUTRAL FEES** |
| Plaintiff, | ) |  |
| vs. | ) |  |
|  | ) |  |
|       | ) |  |
| Defendant. | ) | Docket No.       |

|  |  |
| --- | --- |
| **NAME OF APPLICANT** |       |
| **ADDRESS** |       |
| **CITY, STATE, ZIP CODE** |       |
| **TELEPHONE NUMBER(S)** |       |

1. **Are you presently employed?** [ ] Yes [ ] No

1. If “yes,” state the amount of your salary or wages per month, and give the name and address of your employer.

|  |  |  |
| --- | --- | --- |
| **SALARY OR WAGES PER MONTH** | **NAME AND ADDRESS OF EMPLOYER** | **FULL OR PART TIME** |
|       |       |  |
|       |       |  |

1. If “no,” state the name and address of last employment, date of termination of employment, and amount of your salary or wages per month.

|  |  |  |
| --- | --- | --- |
| **SALARY OR WAGES PER MONTH** | **NAME AND ADDRESS OF EMPLOYER** | **TERMINATION****DATE** |
|       |       |       |

2. **List by name, age and relationship to you, any persons who are dependent upon you for support. Indicate beside each how much you contribute toward their support.**

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME** | **AGE** | **RELATIONSHIP** | **AMOUNT OF SUPPORT** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
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|       |       |       |       |

3.  **Have you received within the past twelve (12) months any money from any of the following sources?**

1. Business, profession or form of self-employment? Yes [ ]  No [ ]
2. Rent payments, interest or dividends? Yes [ ]  No [ ]
3. Pensions, annuities or life insurance payments? Yes [ ]  No [ ]
4. Gifts or inheritances? Yes [ ]  No [ ]
5. Any other sources? Yes [ ]  No [ ]

If the answer to any of the above is “yes,” describe each source of money and state the amount received from each and by whom during the past twelve months.

|  |  |
| --- | --- |
|  **SOURCE OF MONEY**  | **AMOUNT** |
|       |       |
|       |       |
|       |       |
|       |       |

4. **Do you own cash, or do you have any money in a checking or savings account?** [ ] Yes [ ] No

 If the answer is “yes” state the total amount of the cash and owner: $

5. **Do you own any real estate, stocks, bonds, notes, or other valuable property (excluding ordinary household furnishings and clothing)?**

[ ] Yes [ ] No

If the answer is “yes,” describe the property and the state the appropriate value of the items owned and who owns it:

|  |  |
| --- | --- |
| **PROPERTY** | **AMOUNT** |
|       |       |
|       |       |

6. **What kind of motor vehicle do you and/or the alleged incapacitated individual own?**

Year:       Make:       Model:

 Is it paid for? [ ] Yes [ ] No

If not, what is the monthly payment? $

7. **How much do you owe (on liens, mortgages, other encumbrances or debts)?** $

I do solemnly swear that the above information is a true and full account of all my real and personal estate, debts, credits and effects whatsoever without exception, whether they are assets which I control, assets that any person is holding in trust for me, or in which I have any interest. I have not recently, directly or indirectly sold, leased, assigned or otherwise disposed of or made over, in trust for myself or otherwise, other than is mentioned here.

I do solemnly swear I am financially unable to pay the Neutral Fees associated with the mandatory mediation required by the Court.

This      day of      ,       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant Signature

|  |
| --- |
| Subscribed and sworn to before me this |
|  | day of |  | , |  |
|  |  |  |  |  |
| Notary Public for South Carolina |
| My Commission Expires: |  |

**The Application for Waiver of Payment of Neutral Fees is hereby** **[ ]  Granted /** **[ ]  Denied.**

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Judge/Clerk or Deputy Clerk

\_\_\_\_\_\_\_\_\_\_\_\_\_\_, South Carolina