

Pursuant to Gen. Stat. 52-259b, for purposes of determining whether a party is indigent and unable to pay a fee to the court or to pay the cost of service:

"There shall be a rebuttable presumption that a person is indigent and unable to pay a fee or fees or the cost of service of process if (1) such person receives public assistance or (2) such person's income after taxes, mandatory wage deductions and child care expenses is one hundred twenty-five per cent or less of the federal poverty level. For purposes of this subsection, "public assistance" includes, but is not limited to, general assistance, state-administered general assistance, temporary family assistance, aid to the aged, blind and disabled, food stamps and Supplemental Security Income."

ORDER OF COURT

The Court, having found the applicant INDIGENT AND UNABLE TO PAY NOT INDIGENT hereby orders the application:

GRANTED as follows:

1. The following fees payable to the court are waived. (specify:) _____

2. The following fees are ordered paid by the State:

service of process not to exceed \$ _____ (specify amount if limited)

other (specify:) _____

DENIED

BY THE COURT (Print name of judge)	ON (Date)	SIGNED (Judge, Assistant Clerk)	DATE SIGNED
------------------------------------	-----------	---------------------------------	-------------

REQUEST FOR HEARING ON FEE WAIVER APPLICATION (Only if initially denied without a hearing)

I request a court hearing on the application for a fee waiver.

SIGNED (Applicant)	DATE SIGNED
--------------------	-------------

HEARING TO BE HELD AT	SUPERIOR COURT JUDICIAL DISTRICT OR G.A. NO.	DATE OF HEARING	TIME OF HEARING	ROOM NO.
	ADDRESS OF COURT (No., street and town)		SIGNED (Assistant Clerk)	

ORDER OF COURT AFTER HEARING

The Court, having found the applicant INDIGENT AND UNABLE TO PAY NOT INDIGENT hereby orders the application:

GRANTED as follows:

1. The following fees payable to the court are waived. (specify:) _____

2. The following fees are ordered paid by the State:

service of process not to exceed \$ _____ (specify amount if limited)

other (specify:) _____

DENIED

BY THE COURT (Print name of judge)	ON (Date)	SIGNED (Judge, Assistant Clerk)	DATE SIGNED
------------------------------------	-----------	---------------------------------	-------------