State of New Port	
* Argustok	
Chilled Court System	

Affidavit in Support of Application to Waive Court Fees and Costs

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____ Court

County of _____

In the matter of:

Plaintiff/Petitioner (party bringing case) or Subject of Proceeding -against-

Index/File Number:

Defendant/Respondent (opposing party, if none, leave blank)

State of New York, County of _____

I, _____, being duly sworn, says:

- 1. I am a party in this case.
- 2. I live at _____

3. I have the following: [Check all that apply]

Income	Source:	Monthly Amount:
	Public Assistance	\$
	Spousal Support	\$
	Social Security/SSI/SSID	\$
	Wages	\$
	Other:	\$
Bank	Туре:	Balance:
Account(s)	Checking	\$
	Savings	\$
Real Estate	Address:	Market Value:
		\$
Personal	Description:	Value:
Property		\$

4. I request a court order:

Waiving any and all court filing fees for this case

Waiving the filing fee for a Notice of Appeal

Other (specify):

5. I make this application based on CPLR §1101. I do not have and cannot get the funds to pay the necessary costs, fees, and expenses. I cannot proceed unless the order is granted.





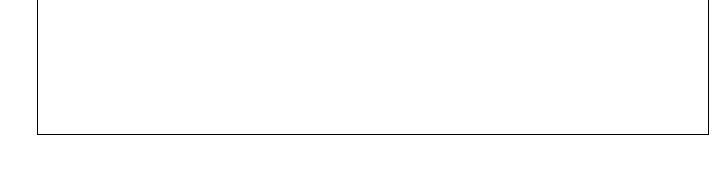
6. The facts of my case are:

explained in my attached court papers.

as follows:

- 7. No other person who may benefit from the outcome of this case is able to pay such costs, fees, and expenses.
- 8. I have not previously applied to waive the court fees and costs in this case.

I **have** previously applied to waive the court fees and costs in this case, but I am applying again because:



Signature in Presence of Notary

Sworn to before me this ______, 20_____, 20_____.

Notary Public

Note: Contact the court and ask if you are required to submit any additional documentation and/or if you are required to serve any other party.