THE GRAND TRAVERSE AND OF OTTAWA AND CHIPPEWA INDIANS TRIBAL COURT	APPLICATION AND ORDER FOR WAIVER OR SUSPENSION OF FEES AND COURT COSTS	CASE NO.

2605 N. WEST BAYSHORE DRIVE, PESHAWBESTOWN, MI 49682 • (231)534-7050 • TribalCourt@gtb-nsn.gov • (231)534-7051 fax

Plaintiff/Petitioner Name, Address, Phone	vs.	Defendant/Respondent Name, Address, Phone

In the matter of:

AFFIDAVIT/APPLICATION FOR WAIVER OR SUSPENSION OF FEES AND COURT COSTS

1. My name is: _____, I am hereby seeking to file the attached pleading(s) with the Tribal Court.
2. I believe I am entitled to, and I request that the Tribal Court waive or suspend the fees and costs in this action for the following reasons:
   - ☐ I am currently receiving public assistance in the amount of $_____ per _____, for _____.
   - ☐ I am unable to pay those fees and costs because of indigence, based upon the following facts:

3. Name	4. Date of birth	12. Spouse Name	13. Date of birth
5. Driver License No.	6. Social Security No.	14. Driver License No.	15. Social Security No.
7. Employer's Name	8. Length of employment	16. Employer's Name	17. Length of employment
9. Employer's Address		18. Employer's Address	

10. Gross Pay $		11. List payroll deductions from amount at left		19. Gross Pay $		20. List payroll deductions from amount at left	
Per	Fed. Inc. tax	State Inc. tax	Local Inc. tax	Per	Fed. Inc. tax	State Inc. tax	Local Inc. tax
(attach paystub)	FICA	Other		**(attach paystub)**	FICA	Other	

21. Home Address	22. Telephone No.

23. Marital Status ☐ Single ☐ Married ☐ Separated ☐ Divorced	24. Names and ages of dependents residing with the petitioner
	25. Names, ages and relationships of all other people living in the home

26. MEDICAL/MEDICAID/DENTAL/OPTICAL INSURANCES List company name and policy no. and whether group, co-deductible, etc.

PLEASE CONTINUE TO NEXT PAGE

27. OTHER INCOME List below all other income including per capita, overtime, tips, public assistance, child support, unemployment, veteran's benefits, social security, pensions, worker's compensation, disability, interest, dividends, rent, etc. Use box 31 for extra space, if needed. **If there is no other income, fill the box with 0 (zero), do not it leave blank.**

	$	Per
	$	Per
	$	Per
	$	Per
	$	Per
	$	Per
	$	Per
	$	Per

28. ASSETS (other than real estate and motor vehicles) List all other assets below including, checking and savings account, stocks, bonds, insurance cost value, IRA's, deferred compensation, retirement funds, bonds posted, etc. Use box f 31 for extra space if needed. **If there are no other assets, fill the box with 0 (zero), do not leave it blank.**

ASSETS	Balance	Institution Name
Checking/Draft		
Savings		
Credit Union		

ASSET		Value
	$	
	$	
	$	
	$	
	$	

29a. REAL ESTATE

Purchase	Current Value	Loan Balance	Payments

29b. MOTOR VEHICLE

Year	Make	Loan Balance	Payments

30. **OTHER PAYMENTS** (Do not include payroll deductions listed in boxes 11 and 20 or property payments listed in box 29) List all other payments including rent, utilities, support, loans, garnishments, mandatory union dues, mandatory retirement contributions, etc. Use box 31 for extra space, if needed. **If there are no other payments, fill the box with 0 (zero), do not leave it blank.**

Item	Payment		Balance	Item	Payment		Balance
1.	$	per		6.	$	per	
2.	$	per		7.	$	per	
3.	$	per		8.	$	per	
4.	$	per		9.	$	per	
5.	$	per		10.	$	per	

31. EXTRA SPACE Use this space for additional items from above. Please label your items as INCOME, ASSETS, PROPERTY, PAYMENTS, etc. **If there are no other items, fill the box with 0 (zero). Do not leave it blank.**

Label	Details	Payment		Balance
1.		$	per	
2.		$	per	
3.		$	per	
4.		$	per	
5.		$	per	
6.		$	per	

I declare that I have read and completed the above, that it has been examined by me and that its contents are true to the best of my information, knowledge, and belief. I further authorize the release of any information needed to verify this affidavit or any other information needed to verify my financial affairs. I understand that if I knowingly list any false information in this affidavit, I may be prosecuted for perjury or found in contempt of court.

_____ _____

Date Applicant Signature

Subscribed and sworn to before me on this ____ day of ____, in the year _____ before me_____, a Notary Public in and for the County of _____, State of _____, personally appeared _____, who proved on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to this instrument and acknowledged he/she executed same.

Notary Public_____

In and For County _____ State of _____

Acting in County of _____

My Commission Expires on _____ (seal)

Case Number: _____

ORDER REGARDING WAIVER OR SUSPENSION OF FEES AND COURT COSTS

The Court having reviewed the above Affidavit/Application for Waiver or Suspension of Fees and Court Costs

IT IS HEREBYORDERED

□ 1. Fees and costs in this action required by law or by Court Rules are hereby waived.

□ 2. Fees and costs in this action are suspended until further order of the Court.

□ 3. The applicant's spouse shall pay the fees and costs required by law or by Court Rule.

□ 4. The application is denied.

□ 5. Other:

_____

_____

_____ _____

Date Tribal Court Judge

Case Number: _____

CHAPTERIV
RULES OF CIVIL PROCEDURE

Rule 4.000 MISCELLANEOUS RULES

4.01 **Applicability.** The rules in this chapter govern procedure in all civil proceedings in the tribal courts, except when a rule applicable to a specific type of proceeding provides a different procedure.

4.02 **Waiver or Suspension of Fees and Costs for Indigent Persons.**

(A) **Applicability.**
- (1) Only a natural person is eligible for the waiver or suspension of fees and costs under this rule.
- (2) Except as provided in Subrule 4.002-F, for the purpose of this rule “fees and costs" applies only to the filing fees required by law.

(B) **Execution of Sworn Statements.** A sworn statement required by this rule may be signed either:
- (1) by the party in whose behalf the sworn statement is made; or
- (2) by a person having personal knowledge of the facts to be shown, if the person on whose behalf the sworn statement is made is unable to sign it because of minority or any disability. The statement must recite the minority or disability.

(C) **Grounds for Waiver or Suspension of Fees.** Except as provided by Subrule 4.002-D:
- (1) if a party demonstrates by the "Statement of Financial Condition" that he/she is supported primarily by public assistance, the payment of fees and costs as to that party shall be suspended; and
- (2) if a party demonstrates by the "Statement of Financial Condition" that he/she is unable because of indigence to pay fees and costs, the Court shall order those fees and costs either waived or suspended until the conclusion of the litigation.

(D) **Frivolous or Malicious Actions.** The Court may, on its own initiative, deny the request for waiver or suspension of fees and dismiss the case if it is satisfied that the action is frivolous or malicious.

(E) **Domestic Relation Cases;** Payment of Fees and Costs by Spouse.
- (1) In an action for divorce, separate maintenance, annulment, or affirmation of marriage, the Court shall order suspension of payment of fees and costs required to be paid by the party filing and order they be paid by the spouse if the party:
  - (a) is qualified for a waiver or suspension of fees and costs under Subrule 4.002-C or 4.002-D; and fees.
  - (b) is entitled to an order requiring the spouse to pay attorney
- (2) If the spouse is entitled to have fees and costs waived or suspended under Subrule 4.002-C or 4.002-D, the fees and costs are waived or suspended for the spouse.

(F) **Payment of Service Fees and Costs of Publication for Indigent Persons.** If payment of fees and costs has been waived or suspended for a party, service of process costs shall also be waived or suspended.

(G) **Reinstatement of Requirement for Payment of Fees and Costs.** If the payment of fees and costs has been waived or suspended under this rule, the Court may, on its own initiative, order the person for whom the fees or costs were waived or suspended to pay those fees and costs when the reason for the waiver or suspension no longer exists.

I hereby acknowledge that I have read the above Rules of Civil Procedure.

_____ _____

Date Applicant Signature

Case Number: _____