

STATE OF FLORIDA

vs.

CASE NO. _____

Defendant/Minor Child

APPLICATION FOR CRIMINAL INDIGENT STATUS

- I AM SEEKING THE APPOINTMENT OF THE PUBLIC DEFENDER; OR
I HAVE A PRIVATE ATTORNEY OR AM SELF-REPRESENTED AND SEEK DETERMINATION OF INDIGENCE STATUS FOR COSTS

Notice to Applicant: The provision of a public defender/court appointed lawyer and costs/due process services are not free. A judgment and lien may be imposed against all real or personal property you own to pay for legal and other services provided on your behalf or on behalf of the person for whom you are making this application.

- 1. I have dependents.
2. I have a take home income of \$ paid: weekly bi-weekly semi-monthly monthly yearly
3. I have other income paid: weekly bi-weekly semi-monthly monthly yearly
4. I have other assets: Cash Bank account(s) Certificates of deposit or money market accounts
5. I have a total amount of liabilities and debts in the amount of \$
6. I receive: Temporary Assistance for Needy Families-Cash Assistance Supplemental Security Income (SSI)
7. I have been released on bail in the amount of \$

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under Section 27.52, Florida Statutes, commits a misdemeanor of the first degree, punishable as provided in Section 775.082, Florida Statutes, or Section 775.083, Florida Statutes. I attest that the information I have provided on this application is true and accurate.

Signed this day of _____, 20_____.

Date of Birth _____

Last 4 Digits of Driver's License or ID Number _____

Signature of Applicant for Indigent Status
Print full legal name
Address
City, State, Zip
Phone number

CLERK'S DETERMINATION

Based on the information in this Application, I have determined the applicant to be Indigent Not Indigent

The Public Defender is hereby appointed to the case listed above until relieved by the Court.

Dated this _____ day of _____, 20_____.

Gary J. Cooney
Clerk of the Circuit Court

This form was completed with the assistance of _____
Clerk/Deputy Clerk/Other authorized person

APPLICANTS FOUND NOT INDIGENT MAY SEEK REVIEW BY ASKING FOR A HEARING TIME.

Sign here if you want the judge to review the clerk's decision of not indigent: _____