

**IN THE CIRCUIT/COUNTY COURT OF THE NINETEENTH JUDICIAL CIRCUIT
IN AND FOR ST. LUCIE COUNTY, FLORIDA**

STATE OF FLORIDA,

Case #: _____

vs.

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 INDIGENT STATUS FOR COSTS.

Notice to Applicant: *The provision of a public defender/court appointed lawyer and costs/due process services are not free. There is a \$50 fee for each application filed. If the application fee is not paid to the Clerk within 7 days, it will be added to costs that may be assessed against you at the conclusion of this case. 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 who you making this application. If you are a parent/legal guardian making this application on behalf of a minor or dependent adult, the information contained in this application must include your income and assets.*

1. I have _____ dependents. (Do not include children not living at home and do not include a working spouse or yourself.)

2. I have a take home income of \$ _____ paid () weekly () every two weeks () semi-monthly () monthly () yearly
(Take home income equals salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, **minus** deductions required by law and other court-ordered support payments.)

3. I have other income paid () weekly () every two weeks () semi-monthly () monthly () yearly. (Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

Social Security benefits..... Yes \$ _____ No	Workers Compensation Yes \$ _____ No
Veterans' benefits Yes \$ _____ No	Rental income..... Yes \$ _____ No
Unemployment compensation Yes \$ _____ No	Retirement/pensions Yes \$ _____ No
Child support or other regular support from family members/spouse Yes \$ _____ No	Dividends or interest Yes \$ _____ No
Union Funds Yes \$ _____ No	Trusts/gifts..... Yes \$ _____ No
	Other kinds of income not on the list..... Yes \$ _____ No

4. I have other assets: (Circle "Yes" and fill in the value of the property, otherwise circle "No"; use the back to provide additional information)

Cash Yes \$ _____ No	*Equity in motor vehicles/boats/ Yes \$ _____ No
Bank account(s) Yes \$ _____ No	*Equity in real estate (excluding homestead)... Yes \$ _____ No
Savings Yes \$ _____ No	List the address of this property _____
Stocks/bonds..... Yes \$ _____ No	
Certificates of deposit or money market accounts Yes \$ _____ No	*Equity means value minus loans. Also, list any expectancy in an interest in such property.

5. I have total liabilities and debts in the amount of \$ _____.

6. I receive: (Circle "Yes" or "No")

Temporary Assistance for Needy Families – Cash Assistance	Yes	No
Poverty-related Veterans' Benefits	Yes	No
Supplemental Security Income (SSI)	Yes	No

7. I have been released on bail in the amount of \$ _____. Cash _____ Surety _____ Posted by: Self _____ Family _____ Other _____

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

Signed on _____ day of _____, 20____.

Date of Birth Last four digits of Driver License or ID number

Address
City, State, Zip Code _____

Signature of Applicant for Indigent Status

Print Full Legal Name
Phone Number: _____
Email Address: _____

CLERK DETERMINATION

_____ Based on the information in this application, I have determined the applicant to be () Indigent () Not Indigent. () Insufficient/No Determination
_____ The Public Defender is hereby appointed to the case listed above until relieved by the Court.

Date: _____ Clerk & Comptroller by _____

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

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

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