

TIOGA COUNTY, PENNSYLVANIA

IFP SELF-HELP PACKAGE

*Prepared by the Tioga County Bar Association for use by indigent pro se litigants
in Tioga County, Pennsylvania*

THIS PACKAGE IS FOR USE WHEN YOU CANNOT AFFORD TO PAY THE FILING FEE IN A NEW CUSTODY CASE AND YOU ARE ASKING THE COURT TO WAIVE THE FILING FEE

- IF YOU AND THE OTHER PARENT HAVE AN AGREEMENT ON HOW CUSTODY SHOULD BE HANDLED, BUT THERE IS NO CUSTODY ORDER IN EFFECT YET, YOU WILL NEED THE 'NEW CUSTODY AGREEMENT SELF-HELP PACKAGE.'
- IF YOU AND THE OTHER PARENT HAVE AGREED TO MODIFY AN EXISTING CUSTODY ORDER, YOU WILL NEED THE 'CUSTODY MODIFICATION AGREEMENT SELF-HELP PACKAGE.'
- IF THERE IS ALREADY A CUSTODY ORDER IN EFFECT AND YOU WANT TO MODIFY IT, BUT THE OTHER PARENT DOES NOT AGREE, YOU WILL NEED THE 'PETITION TO MODIFY CUSTODY SELF-HELP PACKAGE.'
- IF YOU WANT TO FILE A NEW CUSTODY CASE WITHOUT AN AGREEMENT AND NO CUSTODY ORDER IS IN EFFECT YET, YOU WILL NEED THE 'CUSTODY COMPLAINT SELF-HELP PACKAGE.'
- IF THERE IS ALREADY A CUSTODY ORDER IN EFFECT AND YOU WANT TO RELOCATE WITH YOUR CHILD(REN), YOU WILL NEED THE 'RELOCATION SELF-HELP PACKAGE.'
- IF THERE IS ALREADY A CUSTODY ORDER IN EFFECT AND THE OTHER PARENT HAS VIOLATED THE EXISTING CUSTODY ORDER, YOU WILL NEED THE 'CONTEMPT PETITION SELF-HELP PACKAGE.'
- IF YOU CANNOT AFFORD TO PAY THE FILING FEES FOR A NEW CUSTODY CASE, AND YOU WOULD LIKE TO ASK THE COURT TO WAIVE THE FILING FEES, YOU WILL ALSO NEED THE 'IFP PETITION SELF-HELP PACKAGE.'

INSTRUCTIONS:

If you cannot afford to pay the filing fee to start a new custody case, the court may waive the filing fee by letting you submit your case "IFP." IFP stands for "In forma pauperis." In order to apply for IFP status, complete the fill-in-the-blank IFP application included in this package.

STEP 1: COMPLETE THE APPLICATION

On the top of the first page of the Application, write your own name in the blank space for 'Plaintiff' and the other parent or party's name in the blank space for 'Defendant.' Do not fill in the docket number; the

court will assign a number when you go to the courthouse. When you are done, the top of the first page should look something like this:

IN THE COURT OF COMMON PLEAS OF TIOGA COUNTY, PENNSYLVANIA		
<u>Jane Q. Doe</u> <i>Plaintiff</i>	:	
v.	:	
<u>John X. Doe</u> <i>Defendant</i>	:	NO: ___ FS ___ CIVIL ACTION - CUSTODY
	:	
.....		
<u>PETITION TO PROCEED IN FORMA PAUPERIS</u>		

Pages 2 through 4 of the IFP application is an affidavit with questions about your background and financial resources. Fill it out completely and truthfully and sign the last page. **Do not leave any question blank. Use "N/A" for "not applicable" or "\$0.00" where appropriate instead of leaving any line blank.** By signing the affidavit and filing it with the court you are asserting that the information you provide is true and correct to the best of your knowledge, information, and belief. If you intentionally provide false information in a document you submit to the court, you may be subject to criminal charges under 18 PA. C.S.A. § 4904. After you have filed out the affidavit, you should also sign and date the first page of the application. Do not write anything below the word "ORDER" – The rest will be filled in by the judge.

STEP 2: COMPLETE THE REST OF YOUR PAPERWORK & GO TO THE COURTHOUSE

Complete either the 'Custody Complaint Self-Help Package' or the "New Custody Agreement Self-Help Package' and go to the Prothonotary's office at the Tioga County Courthouse. At the Prothonotary's office, they will take your IFP Application and forward it to the judge for a decision. Sometimes you will get an answer while you wait, other times they will need you to come back later because the judge isn't available. If your IFP Application is granted, you will be allowed to file your custody complaint without paying the filing fee. If your application is rejected, you will need to pay the filing fee before you file your complaint. The filing fee is currently \$150.00, but is subject to increase at any time.

PLEASE BE AWARE THAT IF YOU HIRE AN ATTORNEY AFTER YOUR IFP APPLICATION HAS BEEN APPROVED, THE COURT WILL NORMALLY REQUIRE YOU TO PAY THE FILING FEE. THE ONLY EXCEPTION IS IF YOUR ATTORNEY IS REPRESENTING YOU WITHOUT COST, AND IF YOUR ATTORNEY FILED A NOTICE WITH THE COURT STATING THAT THEY ARE REPRESENTING YOU WITHOUT COST. IT IS YOUR DUTY TO INFORM THE COURT IF YOUR SITUATION CHANGES AND YOU CAN AFFORD TO PAY THE FILING FEE, OR IF YOU HAVE HIRED AN ATTORNEY TO REPRESENT YOU AFTER YOUR IFP APPLICATION IS GRANTED.

This Self-Help Custody IFP Application Package is provided by the Tioga County Bar Association for the benefit of pro se custody litigants in Tioga County, Pennsylvania and may be reproduced without restriction. No warranties of any kind are made in connection with these instructions or the included documents, nor is this package intended as a substitute for individualized legal advice. For further assistance, please contact North Penn Legal Services at (877) 953 – 4250.

ADDITIONAL CONTENTS OF THIS PACKAGE:
 -PETITION TO PROCEED IFP (4 PAGES)

**IN THE COURT OF COMMON PLEAS
OF TIOGA COUNTY, PENNSYLVANIA**

Plaintiff

v.

Defendant

:
:
:
:
:
:
:

NO: ____ FS ____

CIVIL ACTION - CUSTODY

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PETITION TO PROCEED IN FORMA PAUPERIS

TO THE HONORABLE JUDGE OF THE ABOVE-REFERENCED COURT:

Please allow the undersigned Petitioner to proceed *in forma pauperis*. An affidavit in support of this Petition is attached hereto.

Date: _____

Petitioner's Signature (pro se)

ORDER

AND NOW, this ____ day of _____, 20____, pursuant to Pa. R. Civ. P. 240(d), and upon consideration of the above Petition to proceed *in forma pauperis* and the attached Affidavit in support thereof, said Application to proceed without payment of costs is hereby

GRANTED

DENIED: _____.

BY THE COURT,

_____ J.

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**IN THE COURT OF COMMON PLEAS
OF TIOGA COUNTY, PENNSYLVANIA**

Plaintiff

v.

Defendant

:
:
:
:
:
:
:

NO: ____ FS ____

CIVIL ACTION - CUSTODY

.....

**AFFIDAVIT IN SUPPORT OF
PETITION TO PROCEED IN FORMA PAUPERIS**

1. The Petitioner's name and address are as follows:

Name: _____

Address: _____

2. The Petitioner is unable to obtain funds to pay the costs of this action.

3. The Petitioner's financial status is as follows:

a) Employment status: EMPLOYED UNEMPLOYED

IF EMPLOYED:

Current Employer: _____

Employer's Address: _____

Salary or Wages per Month: _____

Position/Duties: _____

IF UNEMPLOYED:

Date of Last Employment: _____

Salary or Wages per Month: _____

Position/Duties: _____

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b) Other sources of income within the last year:

Social Security Payments: _____
Support Payments: _____
Public Assistance: _____
Pensions or Annuities: _____
Investments: _____
Unemployment Compensation: _____
Worker's Compensation: _____
Other: _____

c) Other contributions to household support:

Spouse's Name: _____
Spouse's Employer: _____
Spouse's earnings per Month: _____
Spouse's Type of Work: _____
Contributions from Children: _____
Contributions from Parents: _____
Other Contributions: _____

d) Property Owned:

Cash: _____
Checking Account: _____
Savings Account: _____
Certificates of Deposit: _____
Real Estate (including home): _____
Motor Vehicles
(make, model, year, and cost): _____

e) Debts and Obligations:

Mortgage (per month): _____
Rent (per month): _____
Loans (per month): _____
Other: _____

f) Persons dependent on Petitioner
for Support:

Children (Identify by INITIALS
ONLY and state their age(s)):

Other Persons
(Name(s) and relationship(s)):

4. The Petitioner understands that they have a continuing obligation to inform the court of any improvement in their financial circumstances which would permit them to pay the costs incurred herein.
5. The Petitioner understands that if they hire an attorney after their Petition to Proceed in Forma Pauperis is granted, then the Petitioner has an obligation to inform the court and pay the filing fee and any other costs, unless the attorney they hire files a written notice that the attorney is representing the Petitioner at no cost to the Petitioner.

I verify that the statements made in this Petition to Proceed in Forma Pauperis and attached Affidavit are true and correct to the best of my knowledge, information, and belief. I understand that false statements herein are made subject to the penalties of 18 PA. C.S.A. § 4904 relating to unsworn falsification to authorities.

Date: _____

Petitioner's Signature (pro se)