

**Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs**

**Petitioner uses this form** only if Petitioner cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff **cannot be waived**. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

*If you do not understand how to use this form, or if you should use this form, talk to an attorney.*

In the Iowa District Court for \_\_\_\_\_ County  
*County where your case is filed*

**Upon the Petition of**

\_\_\_\_\_  
**Petitioner** *Full name: first, middle, last*

and concerning

\_\_\_\_\_  
**Respondent** *Full name: first, middle, last*

Equity case no. \_\_\_\_\_

**Application and Affidavit to  
Defer Payment of Costs**

**1. Request**

A. I am Petitioner.

B. For my Application and Affidavit, I state that:

*Check all that apply*

- (1)  I am unable to pay the filing fee or service costs or other court costs.
- (2)  I ask the court for permission to proceed without prepayment of costs and fees.
- (3)  I am filing this Application and Affidavit in good faith.
- (4)  I believe I am entitled to what I am asking for in this case.

C. Household

There are \_\_\_\_\_ people living in my household.  
*Number*

D. My household income is \$ \_\_\_\_\_ per month.

*Put the total amount of all income and benefits before deductions for all members of your household.*

E. My income comes from:

*List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIP.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

F. My household has the following monthly expenses:

- (1) Rent or mortgage    \$ \_\_\_\_\_
- (2) Utilities            \$ \_\_\_\_\_
- (3) Phone                \$ \_\_\_\_\_
- (4) Food                 \$ \_\_\_\_\_
- (5) Transportation     \$ \_\_\_\_\_

G. I have \$ \_\_\_\_\_ in cash, checking, and savings.

*Continued on next page*

## 2. Attorney Help

Check one

- A.  An attorney did not help me prepare or fill in this paper.  
B.  An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

\_\_\_\_\_  
Name of attorney or organization, if any      Attorney's P.I.N. # – Ask the attorney

\_\_\_\_\_  
Business address of attorney or organization      City      State      ZIP code

(\_\_\_\_\_) \_\_\_\_\_      (\_\_\_\_\_) \_\_\_\_\_      \_\_\_\_\_  
Attorney's phone number      Attorney's fax number – optional      Attorney's email address – optional

## 3. Certification of Service by Mailing or Delivery

Section 3 to be completed **only if filing in paper** or if the other party is **exempt** from electronic filing.

This document, if filed electronically, will automatically be served on registered parties.

I, \_\_\_\_\_, certify that on \_\_\_\_\_, 20\_\_\_\_\_  
Print your name      Month      Day      Year

I mailed or gave a copy of this Application and Affidavit to the other party or the other party's attorney at this address:

\_\_\_\_\_  
Name of person to whom I delivered or mailed it

\_\_\_\_\_  
Party's or attorney's mailing address      City      State      ZIP code

## 4. Oath and Signature

I, \_\_\_\_\_, have read this Application and Affidavit, and I certify under  
Print your name

penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Application and Affidavit is true and correct.

\_\_\_\_\_, 20\_\_\_\_\_  
Signed on: Month      Day      Year      Your signature\*

\_\_\_\_\_  
Mailing address      City      State      ZIP code

(\_\_\_\_\_) \_\_\_\_\_      \_\_\_\_\_  
Phone number      Email address      Additional email address – if available

\* Whether filing electronically or in paper, you must **handwrite** your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.