

<b>STATE OF ILLINOIS, CIRCUIT COURT</b>  _____ COUNTY	<b>ORDER FOR WAIVER OF CRIMINAL COURT ASSESSMENTS</b>	<i>For Court Use Only</i>
<b>Instructions ▼</b> Directly above, enter the name of the county where the case was filed.  Enter the name of the person being charged as Defendant/ Respondent.  Enter the Case Number.	<b>The People of the State of Illinois or the charging Municipality or Local Government Unit, Plaintiff</b>  v.  _____ <b>Defendant / Respondent</b> ( <i>First, middle, last name</i> )	_____ <b>Case Number</b>

Enter your full name as "Applicant." If the application was filled out on behalf of a minor, enter the minor's full name.

**Applicant Name:** \_\_\_\_\_  
*First*
*Middle*
*Last*

**The Court having reviewed the *Application for Waiver of Criminal Court Assessments* hereby finds:**

**DO NOT** check any boxes or fill in any more blanks on this form. The judge will complete the rest of the form.

1.  The applicant **qualifies** for a **full** waiver of all assessments because (*check only one*):
  - a.  The applicant receives means-based government assistance under one or more of the following programs:
    - Supplemental Security Income (SSI) (Not Social Security)
    - Aid to the Aged, Blind and Disabled (AABD)
    - Temporary Assistance for Needy Families (TANF)
    - SNAP (Food Stamps)
    - General Assistance (GA), Transitional Assistance, or State Children and Family Assistance
  - OR**
  - b.  The applicant's income is **200%** or less of the of the current poverty level as established by the US Dept. of Health & Human Services and the Applicant's non-exempt assets under [735 ILCS 5/12-901](#) and [735 ILCS 5/12-1001](#) are such that the applicant is unable to pay the assessments;
    - OR**
  - c.  Payment of assessments would result in undue hardship to the applicant or his or her family.
  
2.  The applicant **qualifies** for a **partial** (*75%, 50%, or 25%*) waiver of Criminal Court Assessments because the applicant's household income is (*check only one*):
  - more than **200%** but not greater than **250%** (*75% waived*) ; OR
  - more than **250%** but not greater than **300%** (*50% waived*) ; OR
  - more than **300%** but not greater than **400%** (*25% waived*)
 of the current poverty level as established by the US Dept. of Health & Human Services and the Applicant's non-exempt assets under [735 ILCS 5/12-901](#) and [735 ILCS 5/12-1001](#) are such that the applicant is unable to pay the assessments in full.
  
3.  There is a factual issue regarding the applicant's entitlement to a waiver. The nature of the factual issue is: \_\_\_\_\_

Enter the Case Number given by the Circuit Clerk: \_\_\_\_\_

4.  The applicant **does not qualify** for a waiver of assessments because *(must state specific reason)*: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**IT IS HEREBY ORDERED, pursuant to [725 ILCS 5/124A-20](#):**

- A.  *Application for Waiver of Criminal Court Assessments* is **GRANTED**.
- i.  The applicant qualifies for a **full waiver** and will not be required to pay any assessments.
- ii.  The applicant qualifies for a **partial waiver** of assessments as follows *(check one)*:
- 75%** of all assessments are **waived** *(and the applicant must pay 25% of all assessments)*.
  - 50%** of all assessments are **waived** *(and the applicant must pay 50% of all assessments)*.
  - 25%** of all assessments are **waived** *(and the applicant must pay 75% of all assessments)*.
- The applicant must pay assessments by: \_\_\_\_\_  
*Date*
- Upon good cause shown, the applicant may make payments as follows *(describe deferral, installment plan, or other reasonable terms)*: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- B.  *Application for Waiver of Criminal Court Assessments* is **SET FOR HEARING** on \_\_\_\_\_ at \_\_\_\_\_  
*Date* *Time*
- in person at \_\_\_\_\_  
*Courthouse address* *Courtroom*
- remotely by telephone at \_\_\_\_\_  
*Call-in number for telephone remote appearance*
- remotely by video conference at \_\_\_\_\_  
*Video conference website*
- \_\_\_\_\_ *Video conference log-in information (meeting ID, password, etc)*

The applicant must bring the following **documents** to the hearing: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- C.  *Application for Waiver of Criminal Court Assessments* is **DENIED**.
- The applicant must pay assessments by: \_\_\_\_\_  
*Date*

**DO NOT** complete this section. The judge will sign and date here.

**ENTERED:**

\_\_\_\_\_  
*Judge* *Date*