



PO Box 5012
Freehold, NJ 07728-5012
1-877-892-4557

Fee Waiver Request Form for Bankruptcy Courses

Name: _____

Co-filer (If Applicable): _____

Address: _____

Phone #: _____ Email: _____

Navicore Solutions Intake # _____

I am requesting a fee waiver for my required bankruptcy course based on the following:
(please check all that apply)

- My total household income meets the poverty guideline as defined by the HHS Guideline for 2019. (Please consider all household members income whether they are co-filers in the bankruptcy or not.)

How many people are in your household? _____

What is your total monthly household income? _____

- I am being represented by an attorney on a pro bono (free of charge) basis.

As proof of my eligibility for a fee waiver I am enclosing the following documents:

- Last year's tax return and one month of pay-stubs, unemployment or social security checks.
- A letter from my attorney or Legal Services stating my case is being handled pro bono (free of charge).



PO Box 5012
 Freehold, NJ 07728-5012
 1-877-892-4557

2019 POVERTY GUIDELINES					
The 48 Contiguous States and the District of Columbia		Alaska		Hawaii	
Persons in household	150% of the Poverty Guideline (Monthly)	Persons in household	150% of the Poverty Guideline (Monthly)	Persons in household	150% of the Poverty Guideline (Monthly)
1	\$1,561	1	\$1,950	1	\$1,798
2	\$2,114	2	\$2,641	2	\$2,433
3	\$2,666	3	\$3,333	3	\$3,068
4	\$3,219	4	\$4,024	4	\$3,703
5	\$3,771	5	\$4,715	5	\$4,338
6	\$4,324	6	\$5,406	6	\$4,973
7	\$4,876	7	\$6,098	7	\$5,608
8	\$5,429	8	\$6,789	8	\$6,243
Add this amount for each additional person	\$553	Add this amount for each additional person	\$691	Add this amount for each additional person	\$635

Please mail, fax or scan and email both pages of this form along with the required documents to:

Navicore Solutions
Bankruptcy Department
PO Box 5012
Freehold, NJ 07728-5012

Fax #: (732) 863-5040
 Email: bkccounseling@navicoresolutions.org

Under the penalty of perjury I certify that the above statements and the accompanying information are true and correct to the best of my knowledge and belief.

Signature: _____

Date: _____