



FORM CFW 2:

APPLICATION TO SENIOR MAGISTRATE FOR REVIEW OF DECISION NOT TO WAIVE COURT FEE

File Number:

Date of decision not to waive court fee:

Date of this application for review:

An application for review must be made within 14 days after the decision not to waive the fee

Grounds for review

Please explain the grounds on which you think the Head of Court's decision not to waive the fee was incorrect and why you think the waiver should be granted.

Attach any supporting document

You don't need to attach documents that you gave the court when you applied for the waiver. But if you have any other supporting documents, please attached them to this form.

[] I am the applicant completing this form

I believe that my current financial circumstances mean that I may be entitled to the waiver of the court fee. I declare that the information I have given on this form is correct and complete. I understand that if I have given false information, criminal or civil proceedings may be brought against me. I understand that if I have given false information or I do not provide supporting information that may be requested by the Head of Courts, my application may be rejected and the full fee will be payable.

Signed	
Name	
Date	