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| **COURT OF APPEAL FOR BRITISH COLUMBIA** |

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| **FORM 22** | **APPLICATION FOR ORDER THAT NO FEES ARE PAYABLE *(RULE 85)*** |

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|  | Court of Appeal File No. | The file number can be found on the upper right corner of the Notice of Appeal. |
| Name of the first appellant named on Form 1: Notice of Appeal. | v. | Name of the first respondent named on Form 1: Notice of Appeal. |
| **To the person(s) filing the application (the *applicant*):**To obtain an order that no court fees are payable, you must show that: (1) your appeal is not bound to fail; scandalous, frivolous or vexatious; or an abuse of court process; and (2) payment of court fees would cause you undue hardship.If you meet the income and assets criteria in Part B, you meet the financial hardship criteria. If not, you can complete Part C and argue at the hearing that there are special financial circumstances that establish undue hardship, or you can abandon your application.This is a “without notice” application. You do not need to serve this form on any other parties and they do not need to attend the application hearing. |  |  |

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| **Name(s) of person(s) bringing the application** |  |

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| **PART A: BASIS FOR BRINGING THE APPEAL** |
| **Order(s) you are seeking on appeal***Briefly list the order(s) you will ask this court to make on appeal.* |  |
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| **Grounds of appeal***Be as specific as possible. For example, if you believe the trial judge used an incorrect legal test or otherwise* *misapplied the law, note that here.* |  |

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| **PART B: INCOME AND ASSETS** |  |
| **Check the applicable boxes***If the income or assets criteria do not apply, you must complete Part C or abandon your application.* |  | **Income**[ ]  *1-3 household members* - My gross household income is less than $60,000[ ]  *4 or more household members -* My gross household income is less than $84,000**Assets**[ ]  The value of my household assets, after subtracting any outstanding debt  owing on them, is less than $10,000 |
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| **PART C: FINANCIAL CIRCUMSTANCES** |
| **Special financial circumstances** *Be as specific as possible about your financial circumstances. For example, if you have recently lost employment or have a large number of dependants note that here.* |  |

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| **Location of hearing***Enter the address of the courthouse.*  |  |

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| **Date hearing will take place** | *DD/MM/YYYY* | *Chambers applications begin at 9:30 a.m.* |

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| Date form completed | Name of lawyer or person authorizing filing of this form*DD/MM/YYYY* |  |  |