



Claimant's Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Employer's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: ( ) - \_\_\_\_\_ Work Phone: ( ) - \_\_\_\_\_ Carrier: \_\_\_\_\_  
 Preparer's Name: \_\_\_\_\_ Preparer's Phone #: ( ) - \_\_\_\_\_

**REQUEST TO WAIVE FILING FEE**

1. Are you presently employed?  Yes  No
  - a. If yes, state the name and address of your employer and wages below.  
 \_\_\_\_\_  
 \_\_\_\_\_
  - b. If no, where did you last work, when did you stop working, and what were your wages?  
 \_\_\_\_\_  
 \_\_\_\_\_
  - c. Is your spouse employed?  Yes  No If yes, where? \_\_\_\_\_  
 What are your spouse's wages? \$ \_\_\_\_\_
  - d. What is the total income of all working members of your household?  
 \_\_\_\_\_  
 \_\_\_\_\_
2. How many people are dependent on you for their support (include children and relatives)? \_\_\_\_\_  
 How much do you spend weekly for their support? \$ \_\_\_\_\_
3. List any money you have received in the past year other than that listed above and state from what source that money came (gift, inheritance, insurance, other).  
 \_\_\_\_\_  
 \_\_\_\_\_
4. Do you have a checking or savings account?  Yes  No  
 If yes, what is the balance in each account? Checking: \$ \_\_\_\_\_ Savings: \$ \_\_\_\_\_
5. Do you rent or own your home?  Rent  Own Rent or mortgage payment: \$ \_\_\_\_\_
6. Do you own a car?  Yes  No Payments: \$ \_\_\_\_\_
7. List the names of your creditors and amount of debt.  
 \_\_\_\_\_  
 \_\_\_\_\_

To the best of my knowledge, the information above is true and accurate. I have made no attempt to misrepresent my financial condition. I request that the filing fee be waived.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

For official use only.  Fee Waived  Waiver Rejected  Other Disposition

\_\_\_\_\_  
 Chair, S.C. Workers' Compensation Commission

File this form with a Form 30, Application for Commission Review. Refer to R.67-701 through R.67-711 for additional information. File this form with a Form 50, 52, 54, Requests for Motions, Consents and Settlements. Refer to R.67-207, R.67-208, R.67-215, R.67-803 and R.67-805.