

PROCEDURE FOR REQUESTING A COURT APPOINTED INTERPRETER FOR A CIVIL PROCEEDING IN THE LOUDOUN COUNTY CIRCUIT COURT

The Loudoun County Circuit Court will hire Court appointed interpreters under the following circumstances:

1. Any non-English speaking individual determined to be indigent by the Loudoun County Circuit Court.
2. A party who will be offering a witness who needs interpretation will be responsible for making arrangements for such an interpreter through the court's procedures.
3. Any non-English speaking individual represented by Legal Services of Northern Virginia.
4. Any non-English speaking individual who was appointed an interpreter in either Loudoun County General District Court or Loudoun County Juvenile and Domestic Relations Court and now requires an interpreter for the appeal in Loudoun County Circuit Court.
5. Anyone requiring sign language interpreters or CART (Communication Access Real Time Translation).

If you were previously declared indigent and had an interpreter appointed by a lower Court, it is your responsibility, or of your appointed attorney, to notify the Courtroom Clerk Supervisor at (703) 777-0687 or joyce.m.thompson@loudoun.gov to arrange for an interpreter to be present at your hearing. Requests for interpreters are to be made at scheduling of the hearing or at least 3 (three) weeks prior to hearing (*except for extenuating circumstances*).

For sign language interpreters or CART only, contact the Courtroom Clerk Supervisor directly at (703) 777-0687. Requests for sign language interpreters or CART should be made at least 3 (three) weeks in advance of the hearing date.

Any individual who is not represented by counsel and believes that they do not have the financial ability to hire an interpreter should:

1. Fill out the [Request for Court Appointed Interpreter](#) and [Petition for Proceeding in a Civil Case without Payment of Fees or Costs](#) forms included in this packet.
2. Present forms along with a Notarized Affidavit to:
Loudoun County Clerk's Office
Attn.: Civil Division
18 East Market Street, Leesburg, VA, 20176 or P.O. Box 550, Leesburg, VA, 20178
3. A Judge will approve or deny the request.
 - If approved: **The Courtroom Clerk Supervisor will contact you once arrangements for an interpreter have been made. You MUST confirm the details of the hearing at least 1 week in advance with the Courtroom Clerk Supervisor.**
 - If denied: Make independent arrangements to hire an interpreter. You will be responsible for the payment of this interpreter.

**REQUEST FOR COURT APPOINTED INTERPRETER FOR
CIVIL PROCEEDINGS IN THE LOUDOUN COUNTY CIRCUIT COURT**

Date: _____

Style of Case: _____

Civil No.: _____

Plaintiff

v.

Defendant

INTERPRETER NEEDED FOR:

Name: _____

Relation to Case (circle one): PLAINTIFF DEFENDANT WITNESS

Language Required: _____

Date(s) & Time(s) Interpreter Needed: _____

Signature: _____

Counsel (if applicable)/Pro Se Party: _____

Phone: _____ Address: _____

****You must notify the Courtroom Clerk Supervisor, Joyce Thompson (703-777-0687) of any cancellation at least 48 hours in advance of the hearing****

Judge's Use Only

Request for Court Appointed Interpreter has been: _____ Granted _____ Denied

Comments: _____

Date: _____ Signature: _____

Courtroom Clerk's Supervisor Use Only

Date Request Received: _____ Interpreter Confirmed: _____

Date Interpreter Contacted: _____ Vendor: _____

Date Requesting party notified: _____ by _____ mail _____ phone _____ fax _____ email

PLEASE FORWARD TO COURTROOM CLERK SUPERVISOR WHEN COMPLETED

**REQUEST FOR COURT APPOINTED INTERPRETER FOR
CIVIL PROCEEDINGS IN THE LOUDOUN COUNTY CIRCUIT COURT**

AFFIDAVIT OF INDIGENCY

I hereby affirm that the statements on the attached petition for Proceeding in a Civil Case without Payment of Fees or Costs are true, complete, and correct.

Signature of Petitioner

**COMMONWEALTH OF VIRGINIA
COUNTY OF LOUDOUN**

Subscribed to, sworn to and acknowledged before me, a Notary Public in and for the Commonwealth and County aforesaid on this ____ day of _____, 20__.

City/County of _____
Commonwealth of Virginia

Notary Public

Notary Registration Number: _____

My Commission Expires: _____

**PETITION FOR PROCEEDING IN CIVIL CASE
WITHOUT PAYMENT OF FEES OR COSTS**

Case No.

COMMONWEALTH OF VIRGINIA VA.CODE §§ 16.1-69.48:4; 17.1-606

Juvenile & Domestic Relations District Court
 Circuit Court General District Court

..... v.

The undersigned petitioner(s) request the court to permit the petitioner(s) to sue or defend a civil case in this court without the payment of fees or costs and to have from all officers all needful services and process. In support of the petition, the petitioner(s) state that the following information is true:

I currently receive the following type(s) of public assistance in
CITY/COUNTY

TANF \$ Medicaid Supplemental Security Income \$

SNAP (food stamps) \$ Other (specify type and amount)

I currently do not receive public assistance.

Names and address of employer(s) for myself and spouse:

Self

Spouse

NET INCOME:

	Self	Spouse
Pay period (weekly, every second week, twice monthly, monthly)
Net take home pay (salary/wages, minus deductions required by law)	\$
Other income sources (please specify)

..... \$ COURT USE ONLY
TOTAL INCOME \$ + = A

ASSETS:

Cash on hand .....	\$ .....	.....
Bank Accounts at: .....	\$ .....	.....
Any other assets: (please specify) .....	.....	.....
..... with a value of .....	\$ .....	.....
Real estate - \$ NET VALUE .....	\$ .....	.....
..... with net value of .....	\$ .....	.....
Motor Vehicles { YEAR AND MAKE .....	.....	.....
..... with net value of .....	\$ .....	.....
..... YEAR AND MAKE .....	.....	.....

Other Personal Property: (describe)

COURT USE ONLY
TOTAL ASSETS \$ + = B

..... Number in household I have financial responsibility for, including myself.

EXCEPTIONAL EXPENSES (Total Exceptional Expenses of Family)

Medical Expenses (list only unusual and continuing expenses)	\$
Court-ordered support payments/alimony	\$
<input type="checkbox"/> deducted from paycheck <input type="checkbox"/> not deducted from paycheck	
Child-care payments (e.g. day care)	\$
Other (describe): }	\$

COURT USE ONLY
TOTAL EXPENSES \$ = C
COLUMN "A" plus COLUMN "B" minus
COLUMN "C" equals available funds = D

ACKNOWLEDGEMENT

I understand that the court cannot provide me with legal advice, and that it may be advisable to get advice from a lawyer.

..... DATE SIGNATURE - PETITIONER PRINT NAME -PETITIONER

..... RESIDENCE ADDRESS OF PETITIONER

..... SIGNATURE - PETITIONER PRINT NAME - PETITIONER

..... RESIDENCE ADDRESS OF PETITIONER

ORDER

[] The petition is granted.

[] The petition is denied.

..... DATE JUDGE