

FORM: Fine/Fee Waiver Request

DATE: _____, 2026

Name on the Library Account (Account Holder): _____

Library Account Number: _____ (required)

The individual submitting this request is (check all that apply)

- The account holder
- Responsible party for the account holder
- Related to the account holder (indicate how related) _____
- Friend of the account holder
- Legal Guardian of the account holder (Proof of guardianship required)
- Other: _____

Full Name of individual submitting request *on behalf of* the account holder: _____

I am requesting \$_____ in **fines** be [] waived [] reduced.

I am requesting \$_____ in **fees** be [] waived [] reduced.

I am making this request based on the following (check all that apply). Additional information and required documentation should be attached to this form.

- Account holder is deceased (documentation required)
- Responsible party is deceased (documentation required)
- Account holder was a minor (birth to 17 yrs) when fines/fees accrued
- Natural disaster/Severe Weather (documentation required)
- Extended illness, incapacitation, or hospital stay (documentation required)
- Incarceration (documentation required)
- Home Displacement (documentation required)
- Insufficient funds (documentation required)
- Former group home or foster care status
- Other _____

Have fines or fees been previously waived or reduced on this library account? _____

If yes, when?

Requestor Contact Information:

Name: _____

Mailing Address: _____

City _____ **State** _____ **Zip Code** _____

Phone: _____

Email: _____

Return completed and signed form along with all required documentation to any Rowan Public Library Branch in person or

Mail to Rowan Public Library – South Rowan Regional Library
 ATTN: Branch Operations Manager
 920 Kimball RD
 China Grove, NC 28023

Fax: 704-855-2449

Email: info@rowancountync.gov

Rowan Public Library will notify requestor if the request is granted or declined. Please allow 30 business days for the library to respond. Follow up inquiries can be made by emailing info@rowancountync.gov or calling 704-216-7732.

Receiving Staff Member Initials: _____ Date Received: _____