

Commonwealth of Kentucky  
Court of Justice [www.kycourts.gov](http://www.kycourts.gov)

AP Part IV Master Commissioners of  
the Circuit Court

## MASTER COMMISSIONER MCAPPM WAIVER REQUEST

**FINANCIAL SERVICES USE ONLY:**Status: ☐ GRANTED ☐ NOT GRANTED

Effective Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ ☐ N/A

Signature: \_\_\_\_\_

**INSTRUCTIONS:** To request a waiver to the *Master Commissioner Accounting Policies and Procedures Manual* (MCAPPM), complete this form and email it to [MasterCommissionerFilings@kycourts.net](mailto:MasterCommissionerFilings@kycourts.net). Only one waiver request can be submitted per form. Waivers must be consistent with the overall intent and spirit of *AP Part IV: Master Commissioners of the Circuit Court*.

**SECTION 1: REQUEST INFORMATION**

Master Commissioner: \_\_\_\_\_ County: \_\_\_\_\_ Date of Request: \_\_\_\_\_

**SECTION 2: WAIVER REQUEST**

I am requesting the following waiver to a requirement of the MCAPPM:

- ☐ Maintaining only an escrow account and not a separate operating account. If granted, I understand:
- That any instructions to deposit or maintain funds in the operating account shall be interpreted to mean the escrow account instead.
  - If at any time the office generates fees in excess of the compensation authorized for the Master Commissioner, this waiver is no longer applicable, and I am required to open a separate operating account.

[100.6(4), 100.7(5), 100.9(4), 100.10(8,11,15), 100.12(17,19,20), 100.13(2,11), 100.15(5), 100.16(2)]

- ☐ That the following bank account(s) be non-interest bearing (select all that apply): [100.12 (17), 100.13]

☐ Escrow Account

☐ Operating Account

- ☐ To deposit non-sale fees directly into an operating account instead of first depositing them into an escrow account. [100.7(5), 100.12(17), 100.16(2)]

- ☐ To file the *Annual Report of Master Commissioner* and all required accompanying documentation and Schedules later than March 1 deadline. I need an extension of \_\_\_\_\_ days. [100.12(5)]

- ☐ To file the *Final Report of Master Commissioner* and all required accompanying documentation by \_\_\_\_\_ (30 days upon termination, resignation, or death of previous Master Commissioner) deadline. I need an extension of \_\_\_\_\_ days. [100.14(5)]

- ☐ Other: \_\_\_\_\_

Manual Section Number: \_\_\_\_\_

Describe below the reason for the request. Attach additional pages if needed.