

**APPLICATION FOR TIME PAYMENT PLAN, EXTENSION, COMMUNITY SERVICE,
OR INDIGENCY CONSIDERATION (Page 1 of 2)**

Answer all questions. If not applicable, use N/A, or "0" if appropriate. As much information as possible, will help in considering your request.

Name: _____

Address: _____

Phone Number: _____ Email: _____

INITIAL ALL THAT APPLY.

_____ The Court has advised me that I am responsible for satisfying the judgment and sentence:

in the amount of \$ _____ in Cause Number _____;

in the amount of \$ _____ in Cause Number _____;

in the amount of \$ _____ in Cause Number _____; and

in the amount of \$ _____ in Cause Number _____.

_____ I assert that I am unable to pay the fine and costs immediately and that the following information is documentation that I have insufficient resources or income to pay today.

_____ I request that the Court extend the payment to a later date.

_____ I request that the Court grant a time payment plan.

_____ I request that I be able to discharge the fine and costs by performing community service, because I have no resources to pay and I am unable to pay the fine and costs.

_____ I have been determined to be indigent by the federal government and I am receiving or I am eligible to receive assistance under a federal program. Name of program: _____.

Employer: _____ Job Title: _____

Employer's Address: _____

Salary: \$ _____ per _____ Employer's Telephone Number: _____

If not working, state why: _____

If attending school, provide name, number of hours enrolled and campus address: _____

Please check any other source of income you receive (*proof required*):

Welfare Social Security SSI Disability Retirement Child Support Unemployment

List the source and amount of any other income you receive: \$ _____

Marital Status (Check One): Married Single Divorced Widowed

Spouse's Name: _____ Spouse's Salary: \$ _____ per _____

Spouse's Employer: _____ Spouse's Job Title: _____

List all your dependents, their ages, and their relationship to you: _____

Your residence is (Check One): Rented Owned Rent-Free

LIST ALL BANK ACCOUNTS IN YOUR NAME OR FROM WHICH YOU MAY WITHDRAW FUNDS:

Name of Institution	Address of Institution	Type of Account	Account Balance
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LIST ALL OF YOUR CREDITORS (including credit cards) AND THE AMOUNT YOU OWE EACH:

_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

MONTHLY INCOME

Current Salary/Income: \$ _____
Child Support/Alimony: \$ _____
Spouse's Income: \$ _____
Other Income: \$ _____
TOTAL INCOME: \$ _____

NAME OF BANK:

Checking Balance: \$ _____
Savings Balance: \$ _____

REMARKS:

MONTHLY EXPENSES

Home mortgage, rent, or lot rental: \$ _____
Utilities (electricity, water, gas): \$ _____
Phone, internet, cable, entertainment: \$ _____
Groceries and sundries: \$ _____
Creditor payments: \$ _____
Car payment: \$ _____
Car insurance: \$ _____
Medical, dental, drug expenses: \$ _____
Other insurance (life, home, medical): \$ _____
Child care expenses: \$ _____
Child support/alimony payments: \$ _____
Other expenses: \$ _____
\$ _____
TOTAL EXPENSES: \$ _____

REFERENCES (List 2):

1) Name: _____ Relationship: _____
Address: _____
Phone: _____
2) Name: _____ Relationship: _____
Address: _____
Phone: _____

YOUR INITIAL BY EACH OF THE FOLLOWING STATEMENTS INDICATES THAT YOU HAVE READ THE STATEMENT, UNDERSTAND IT, AND AGREE TO IT.

___ I **promise** that until my fines have been paid in full, I will notify this Court in person or by first-class mail of any changes of my address or telephone number at the following address Combine Municipal Court, 123 Davis Rd., Combine, TX 75159 within five (5) days of the change.

___ I **understand that until my fines and court costs are paid in full I have a continuing obligation to notify the Court of any changes in my financial status that may hinder my ability to satisfy the judgment or help me satisfy the judgment.**

___ I **understand** that if I pay any part of the fine, costs, or restitution (if applicable) on or after the 31st day after judgment was entered that I am responsible for paying a \$25 time payment fee (Section 133.103, Local Government Code).

___ I **understand that submitting false financial information to the Court constitutes the crime of tampering with a governmental record, punishable by incarceration and/or the imposition of a fine (Section 37.10, Penal Code). I swear that all the information in this application is true, correct, and complete to the best of my knowledge and belief.**

Date Signed

Defendant's Signature

Sworn and subscribed before me this day _____ of _____, 20__.

(Judge) (Clerk)