

APPLICATION FOR TIME PAYMENT, EXTENSION, OR COMMUNITY SERVICE (Page 1 of 4)

CAUSE NUMBER(S): _____

STATE OF TEXAS

VS.

IN THE MUNICIPAL COURT

CITY OF _____

_____ COUNTY, TEXAS

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: _____.

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Name: _____ Telephone Number: _____

Address: _____

Employer: _____ Job Title: _____

Employer's Address: _____

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

Marital Status (Check One): Married Single Divorced Widowed

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

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

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

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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____