

Instructions for Payment Plan Application:

1. If you would like to request a payment plan, you will need to complete each blank on the payment plan application below.
2. If you have been instructed to, you will need to submit proof of all income and expenses listed on the payment plan application.
3. Turn in payment plan application and proof of income and expenses (if applicable) to the Municipal Court on or before your appearance date.
4. If this is your first appearance for your citation, you will also need to submit a plea form for each offense (violation) with your payment plan application.
5. You will also need to provide a down payment for your payment plan.
6. Please contact the court at 903-342-6033 to discuss your down payment and payment terms.

Thank You,

Sandra Harris

City of Winnsboro
Municipal Court Clerk
(903)342-6033
sharris@winnsborotexas.com

STATE OF TEXAS
VS.

Your legal name

§
§
§
IN THE MUNICIPAL COURT
CITY OF WINNSBORO
WOOD COUNTY, TEXAS

INITIAL ALL THAT APPLY.

The Court has advised me that I am responsible for satisfying the judgment and sentence for the following fine(s) and court cost(s):

Citation # _____.

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: _____.

APPLICATION FOR TIME PAYMENT, EXTENSION, OR COMMUNITY SERVICE

Name: _____ Telephone Number: _____

Street Address: _____

*email address _____ Mailing

address: _____

SS# _____ - _____ - _____ DL# _____ State Issued

by: _____

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

Do you have a cell phone? _____ If yes what is the number _____ Cost per month? _____

ESTIMATE YOUR AVERAGE CURRENT MONTHLY EXPENSES FOR YOU AND YOUR FAMILY:

- a. Home mortgage payment, rent, or lot rental for trailer: \$ _____
- b. Routine home maintenance: \$ _____
- c. Utilities (electricity, water, gas, telephone): \$ _____
- d. Food and sundries: \$ _____
- e. Clothing: \$ _____
- f. Laundry and cleaning: \$ _____
- g. Newspapers, periodicals, & books, including school books: \$ _____
- h. Medical, dental, and drug expenses: \$ _____
- i. Insurance (auto, life, medical, homeowners/renters): \$ _____
- j. Transportation, including auto payments: \$ _____
- k. Taxes not deducted from wages or included in mortgage: \$ _____
- l. Alimony or support payments: \$ _____
- m. Religious/charitable contributions: \$ _____
- n. Other expenses (use reverse side if necessary):
\$ _____
\$ _____
\$ _____
\$ _____

LIST ALL REAL ESTATE OWNED BY YOU OR YOUR SPOUSE:

LIST & GIVE THE VALUE FOR ALL PERSONAL PROPERTY OWNED BY YOU OR YOUR SPOUSE:

h. Automobiles, trucks, trailers, boats, and accessories (use reverse side if necessary):

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

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 501 S. Main St., Winnsboro, Texas 75494, 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. (Sec. 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: _____ Defendant's Signature: _____

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

Judge Signature