

**APPLICATION FOR TIME PAYMENT, EXTENSION, OR COMMUNITY SERVICE**

**CAUSE NUMBER(S):** \_\_\_\_\_

**STATE OF TEXAS**

**VS.**

**IN THE MUNICIPAL COURT**

**CITY OF FLORENCE**

**WILLIAMSON 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:

\_\_\_\_\_.

**APPLICATION FOR TIME PAYMENT, EXTENSION, OR COMMUNITY SERVICE**

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

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**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:**

- a. Deposits in financial institutions and cash on hand: \$ \_\_\_\_\_
- b. Household goods and supplies (use reverse side if necessary):  
 \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

c. Household furniture and furnishings (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

d. Jewelry (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

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e. Sports equipment and musical instruments (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

f. Television, home theater, media, and stereo equipment (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

g. Household appliances (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

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

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

i. Machinery and tools, lawn and garden equipment (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

j. Office equipment, supplies, furniture, and inventory (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

k. Farming equipment, supplies, livestock, and other animals (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

1. Any other property not listed above (use reverse side if necessary):

\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_      \_\_\_\_\_ \$ \_\_\_\_\_

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

**LIST ALL OF YOUR CREDITORS (including credit cards) AND THE AMOUNT YOU OWE EACH (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 106 South Patterson ~ PO Box 430, Florence, Texas 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 31<sup>st</sup> 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) (Clerk) (Deputy Clerk)  
(municipal court seal)