<u>CITY OF BASTROP MUNICIPAL COURT</u> <u>Application and Financial Affidavit for Time Payment Plan</u>

Please COMPLETE ALL information and print legibly. DO NOT LEAVE ANY BLANKS.

PERSONAL INFORMATION:

Name:	Date of Birth:
Mailing Address: Cit	ty: State: Zip:
Physical Address: Ci	ty: State: Zip:
Your residence is (Check One): Rented Owned Owned	□ Rent-Free □
Email Address:	Telephone #:
Driver's License # or ID # and State:	Social Security #:
	orced Widowed # of Dependents living with you:
	Relationship: Phone #:
EMDI OVMEN'T INFORMATION.	
EMPLOYMENT INFORMATION:	
	Job Title:
	elephone Number:
List the source and amount of any other income you recei	ve:
Spouse's Employer:	Spouse's Job Title:
Spouse's Salary: \$ per Spou	ise's Employer's Telephone Number:
	o to you:
ESTIMATE YOUR AVERAGE CURRENT MONTHLY	EXPENSES FOR YOU AND YOUR FAMILY:
a. Home mortgage payment, rent, or lot rental for trailer:	\$
b. Utilities (electricity, water, gas, telephone):	ф.,
c. Food and sundries:d. Medical, dental, and drug expenses:	\$ \$
 e. Insurance (auto, life, medical, homeowners/renters): 	
f. Transportation, including auto payments:	\$ \$
g. Alimony or support payments:	\$
h. Other expenses (use reverse side if necessary):	\$
LIST ALL OF YOUR CREDITORS (including credit card	s) AND THE AMOUNT YOU OWE EACH
(Use reverse side if necessary):	•
\$	\$
\$	\$

ACKNOWLEDGEMENT AND DECLARATION

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

- _____ I promise that I will notify this Court in person or by first-class mail (mail to 104 Grady Tuck Ln., Bastrop, TX 78602) of any changes of my address or telephone number within five (5) days of the change.
- _____ I understand that 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 if citation is issued on or before 12/31/19, if citation was issued on or after 1/1/20 the Time Payment Reimbursement fee will be \$15 (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.

Defendant's Signature	Date:
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