



**GRAYSON COUNTY
JUSTICE OF THE PEACE, PCT. 1
APPLICATION FOR EXTENSION OF TIME PAYMENT PLAN**



(Complete front and back – please print) Blank answers will delay your processing.

HOW MUCH ARE YOU PREPARED TO PAY TODAY? \$ _____

PERSONAL INFORMATION:

Name: _____
Last *First* *Middle* *Go By*

Physical Address: _____
Street *Apt. #* *City/State* *Zip Code*

Mailing Address: _____
Street *Apt. #* *City/State* *Zip Code*

Home # _____ Cell # _____ Work # _____

If no phone, number where you can be reached: _____

Race _____ Sex _____ Height _____ Weight _____ Eye Color _____ Hair Color _____

Date of Birth _____ DL / ID # _____ Social Sec. # _____

Single ___ Married ___ Separated ___ Divorced ___

Spouse's Name _____
Last *First* *Middle*

Spouse's address & phone # (if different) _____
Address *Phone*

Nearest Living Relative not Residing With You _____
Name *Relationship*

Address *Phone Number*

Two persons who will know how to contact you at all times:

Name *Address* *Phone*

Name *Address* *Phone*

EMPLOYMENT INFORMATION:

EMPLOYED ___ How Long? _____ UNEMPLOYED ___ How Long? _____

Employer: _____
Company Name *Address* *City*

Position *Supervisor* *Supervisor's Phone #*

Hourly wage \$ _____ Take Home Pay \$ _____ weekly / bi-weekly / monthly Next Pay Day _____

(OVER)

INCOME/ASSETS (Please check any other sources of income you receive and the amounts):

Welfare \$ _____ Retirement \$ _____ Social Security \$ _____
Unempl. \$ _____ Food Stamps \$ _____ Disability \$ _____
Child Support \$ _____

Other sources of income not listed above: What? _____ Amount \$ _____

Bank Accounts: ___ Checking Bank Name _____ Balance \$ _____
___ Savings Bank Name _____ Balance \$ _____

Automobiles: _____
Year Make Model Year Make Model

OBLIGATIONS:

Number of Dependents you support? ___ Spouse ___ Children (ages) _____
___ Other (relationship) _____

List all of your creditors (ex: bank loans, credit card accounts, finance companies, rent-to-own companies, auto payment, mortgage company, etc.)

Company Name	Balance Owed	Payment Amt. (wk./mo.)
Company Name	Balance Owed	Payment Amt. (wk./mo.)
Company Name	Balance Owed	Payment Amt. (wk./mo.)
Company Name	Balance Owed	Payment Amt. (wk./mo.)

Monthly Expenses Paid:

Rent/Mortgage \$ _____ Food \$ _____ Fuel \$ _____ Car Ins. \$ _____
Electric \$ _____ Gas \$ _____ Phone \$ _____ Water \$ _____
Child Care \$ _____ Medical \$ _____ Child Support \$ _____ Other \$ _____

Landlord/Mortgage Company _____ Address _____ Phone # _____

ACKNOWLEDGMENT AND DECLARATION:

Under penalty of perjury, I hereby certify the information I have supplied is a complete and accurate statement of my current financial condition. I authorize the Justice of the Peace of Grayson County, their employees or agents to conduct a complete and thorough investigation of my statement. I understand this investigation could include direct verifications of all information given and the obtaining of reports from credit reporting agencies. It is with this understanding and acknowledgment that I formally request an extension of time to pay fine and courts costs now due and payable to Grayson County.

Sworn and Subscribed to this _____ day of _____, 200__, by the Defendant.

X _____
Defendant's Signature

Clerk / Judge