

(COMPLETE FRONT and BACK – PLEASE PRINT) Blank answers will delay your processing.

LUBBOCK COUNTY CRIMINAL COURTS
APPLICATION FOR EXTENSION OF TIME PAYMENT PLAN



HOW MUCH ARE YOU PAYING TODAY? \$ _____

A) PERSONAL INFORMATION: COMPLETE ALL BLANKS

Social Sec. # _____ - _____ - _____ Date of Birth _____ Race _____ Sex _____ Ht. _____' _____" Wt. _____ lbs

Color Eyes _____ Color Hair _____ Driver's License [] or I.D. [] Number# _____ State _____

Name: _____

Last First Middle Go By

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

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

Does anyone other than you live at this address? Yes [] No [] If yes, who & relationship? _____

Cell/Message Phone: _____ Home Phone: _____ Work Phone: _____

[] Married [] Single [] Separated [] Divorced Email: _____

If married, Spouse's Name
First Middle Last

Spouse's Address & Phone # (if different)
Address Phone

B) CONTACTS: LIST (4) PEOPLE WHO CAN CONTACT YOU. (1) MUST BE A RELATIVE (NAMES, PHONES & RELATIONSHIP REQUIRED).

1) _____
Name Address Phone Relationship

2) _____
Name Address Phone Relationship

3) _____
Name Address Phone Relationship

4) _____
Name Address Phone Relationship

C) STUDENT INFORMATION: ARE YOU A STUDENT? [] YES [] NO IF "NO," MOVE TO PART "D"

If yes, [] College [] High School [] Other Status [] Full-time [] Part-time Education (grade level completed) _____

Name of School _____ Who pays tuition? _____ Hours you attend school: Everyday _____ to _____ or

MWF _____ to _____ or TTH _____ to _____ or Other (explain): _____

For Office Use Only Date Total Due \$ Court # Offense
Case Number Interviewer Over Phone [] / In-Person []
Std. Plan [] / Coll. Plan [] / Jud. Plan [] Community Service [] Yes [] No

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D) EMPLOYMENT: Are you Employed Unemployed?

How long? _____ Days Weeks Months Years

If employed, Part-time Full-time

If "Part-time," approximately how many hours per week: _____

Employer: Name _____

Address _____

Phone# (_____) _____ - _____

Hourly wage \$ _____ Take Home Pay \$ _____

weekly bi-weekly monthly Next Pay Day _____

Spouse's Employer: Employed Unemployed

How long? _____ Days Weeks Months Years

If employed, Part-time Full-time

If "Part-time," approximately how many hours per week: _____

Employer: Name _____

Address _____

Phone# (_____) _____ - _____

Hourly wage \$ _____ Take Home Pay \$ _____

weekly bi-weekly monthly Next Pay Day _____

E) CREDITORS

List All of Your Creditors (ex. Banks, Auto Payment, Credit Card Accounts, Finance Companies, Rent-to-Own Companies, etc.)

1) _____	Company Name	Balance Owed	Payment Amt. (wk./mo.)
2) _____	Company Name	Balance Owed	Payment Amt. (wk./mo.)
3) _____	Company Name	Balance Owed	Payment Amt. (wk./mo.)
4) _____	Company Name	Balance Owed	Payment Amt. (wk./mo.)

F) ASSETS: Bank Accounts:

Checking Bank Name _____ Balance \$ _____

Savings Bank Name _____ Balance \$ _____

Automobiles:

Year _____ Make/Model _____

Year _____ Make/Model _____

G) OTHER INCOME

- Welfare \$ _____
 - Retirement \$ _____
 - SSI Retirement \$ _____
 - SSI Disability \$ _____
 - Unemployment \$ _____
 - Food Stamps \$ _____
 - Child Support \$ _____
 - Other Income \$ _____
- Explain: _____

H) EXPENSES CONTINUED:

- Phone \$ _____
 - Other Utilities \$ _____
 - Food \$ _____
 - Car Insurance \$ _____
 - Child Care \$ _____
 - Life/Hlth Ins. \$ _____
 - Child Support \$ _____
 - Prob. /Parole \$ _____
 - Tax Liens \$ _____
 - Other \$ _____
- What? _____

All expense in you & spouses name?

Yes No

I) DEPENDENTS

How many dependents do you support? _____

- Spouse
- Child (ren)
 - Age _____ Age _____
 - Age _____ Age _____
 - Age _____ Age _____
- Other
 - Relationship _____
- Other
 - Relationship _____

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 Judicial Compliance Department of Lubbock County, their employees or agents to conduct a complete and thorough investigation of my statement. I understand this investigation and subsequent contact could include direct verifications of all information given, through phone calls, texts via auto or robodialer, or email and any other electronic means including obtaining reports from credit reporting agencies. Upon acceptance of a standard plan, I waive my right for Judicial Compliance or its affiliates to review my financial status. It is with this understanding, consent and acknowledgment that I formally request an extension of time to pay assessed fines, fees and court costs now due and payable to Lubbock County. It is also with this understanding, that I accept the terms and conditions of any and all payment or non-monetary plans.

Sworn and Subscribed to this _____ day of _____ 20_____, by the Defendant.

X _____
Defendant's Signature

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