



**BELLS MUNICIPAL COURT**

203 S. Broadway St.

Bells, Texas 75414

(903) 965-7744 fax (903) 965-0250

court@cityofbells.org

**APPLICATION FOR TIME PAYMENT, EXTENSION, OR COMMUNITY SERVICE**  
**(Page 1 of 7)**

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

**STATE OF TEXAS**

**VS.**

\_\_\_\_\_

**IN THE MUNICIPAL COURT**

**CITY OF BELLS**

**GRAYSON 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:

\_\_\_\_\_.

Name: \_\_\_\_\_

Phone 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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**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 schoolbooks: \$ \_\_\_\_\_
  - 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 AND YOUR SPOUSE:**

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**LIST THE ESTIMATED 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):

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

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):

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

**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 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 (*court address*) \_\_\_\_\_ 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 time payment fee (Section 133.103, Local Government Code, Article 102.030, Code of Criminal Procedure).

\_\_\_\_\_ 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.

Date: \_\_\_\_\_

Defendant's Signature: \_\_\_\_\_

Sworn and subscribed before me this day \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

(Judge) (Clerk) (Deputy Clerk)