New Braunfels Municipal Court
550 Landa Street
New Braunfels, Texas 78130-6110
court@newbraunfels.gov
830 221 4180

APPLICATION FOR ALTERNATIVE PAYMENT ARRANGEMENT

(PAYMENT PLAN, EXTENSION or COMMUNITY SERVICE)

Submit to court@newbraunfels.gov WITH a copy of your photo I.D. and a completed PLEA form (if you have not already entered a plea).

All blanks must be filled in **to be considered for time payment plan or community service.**

Defendant's Name:_____ Email Address: _____

Citation/Docket Number:_____ Cell Phone Number: _____

Street Address: _____ City: _____ State: _____ Zip:_____

Include Apt, Suite, or Lot #. **Date of Birth:**_____

INCOME

I have one employer/job. Y◯ N◯ My employer(s) is/are:_____

I have multiple employers/jobs. Y◯ N◯ My job title is:_____

I work a total of _____ number of hours weekly.

My weekly salary is: $_____. My monthly salary is: $_____.

I also receive income from (*rent, alimony, lawn work, allowance, disability, cash payment for odd jobs, babysitting, etc.)*_____

My additional income totals $_____ monthly.

Check one:

I ____OWN _____ RENT my residence, and my monthly house payment/rent is: $_____

OR I am _____ HOMELESS. I live _____ RENT FREE.

Total number of dependants that live with me: _____

List all dependants, their ages and relationship to you:

_____

I am ◯ Married ◯ Single ◯ Divorced ◯ Widowed ◯ Sharing My Residence/Co-Habitating

Spouse's/Partner's Name:_____

Spouse's/Partner's Monthly Salary/Income: $_____

Spouse's/Partner's employer/job:_____ Spouse's/Partner's Job Title:_____

What is the current balance of your checking account? $_____

What is the current balance of your savings account? $_____

How much do you currently owe on your credit cards? $

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EXPENSES

Estimate average monthly expenses for YOU AND your HOUSEHOLD:

Home mortgage payment, rent, or lot rental for trailer:	
Routine home maintenance:	
Utilities (electricity, water, gas, telephone):	
Food and Sundries:	
Clothing and Uniforms:	
Laundry and cleaning	
Tools required for work/school:	
Newspapers, periodicals, & books, including school books:	
Medical, dental, and drug expenses:	
Insurance (auto, life, medical, homeowners/renters):	
Taxes not deducted from wages or included in mortgage:	
Alimony or support payments:	
Religious/charitable contributions:	
Tuition or Student Loans:	
Civil or Criminal Fines/Fees or Restitution:	
Other Expense:	
Other Expense:	
TOTAL MONTHLY ESTIMATE OF EXPENSES:	0

ACKNOWLEDGEMENT AND AFFIRMATION

Your signature below confirms that you have read, understand, and agree to all of the following:

1. I understand that requesting payment arrangements in conjunction with the attached plea form, waives my right to a trial.
2. I understand that a conviction may be entered on my case and it may be reported to the Texas Department of Public Safety for inclusion on my driving record.
3. 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.
4. 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 $ 15.00 time payment fee (Section 133.103, Local Government Code.
5. 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)
6. I affirm that all the information provided in this document is true and correct to the best of my knowledge.

Date:_____ **Defendant's Signature:** _____

Effective May 1, 2021, all credit/debit card transactions will incur a 2.75% processing fee paid directly to the merchant provider. To avoid incurring this fee, you may pay by e-check, cashier's check, or money order OR with cash IN PERSON ONLY.

SUPPORTING FINANCIAL DOCUMENTS INSTRUCTION SHEET

You have requested a payment arrangement or have been scheduled to appear and show cause why you failed to pay the fine and costs assessed against you. You should complete the attached payment ability acknowledgment form. You should be prepared to discuss your financial circumstances and you are required provide the following documentation to assist the court in understanding your situation.

BRING WITH YOU TO PRESENT TO THE COURT:

-The completed financial information form

-Most recent income tax return filed

-Bank statements from the last three months

-Pay stubs from the last three months

-Proof of any other income or payments received on a regular basis (i.e., unemployment, Social Security, SSI, disability, annuity, pension, etc.)

-Proof of your housing expense including any mortgage payment or rental agreements

-Proof of utility expenses including electric, gas, water, telephone, cell phone, garbage, cable TV, internet, etc.

-Proof of vehicle ownership or lease agreement and any other transportation related expenses

-Proof of any governmental financial supplements or assistance including food, food stamps, housing, and Medicare subsidies

COMMUNITY SERVICE

If you are unable to pay your fines, community service is another way in which your fines can be satisfied. Community service is unpaid volunteer work for a non-profit charity or government office. A credit of $18.75 is given for each hour of community service submitted. If it is determined that community service is appropriate, the court will give you a list of places –where community service can or shall be performed based on your financial and case history with the court.

DO NOT START COMMUNITY SERVICE UNTIL APPROVED, ORDERED, OR INSTRUCTED BY THE COURT.

IMPORTANT:
If you report that you have no income, the Judge will expect you to explain how your living expenses are being paid. You should be prepared to identify the person(s) with whom you live and who provides financial support. The Judge will require a notarized statement from the person supporting you, confirming the nature and extent of the assistance they provide, including payment of housing, utilities, food, transportation, or other living expenses.

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If you have not already entered a plea on the case(s) for which you are asking the Judge to consider alternative payment arrangements, you must complete and submit this form.

PLEA FORM

Docket/Citation Number_____

STATE OF TEXAS	§	**IN THE MUNICIPAL COURT**
Vs.	§	**CITY OF NEW BRAUNFELS**
_____	§	**STATE OF TEXAS**

Defendant's Name

Initial Your Choice (pick ONE)

_____ I hereby enter a plea of **GUILTY** waiving my right to a jury trial.
A plea of GUILTY means you are admitting your guilt to the charge filed against you. If you enter a plea of guilty, a finding of guilt will be entered by the Court and you will be required to pay the fines and court costs for your citation.

_____ I hereby enter a plea of **NOLO CONTENDERE** (NO CONTEST) waiving my right to a jury trial.
A plea of NOLO CONTENDERE (NO CONTEST) means you are not contesting the charge filed against you. If you enter a plea of no contest, a finding of guilt will be entered by the Court and you will be required to pay the fines and court costs for your citation.

_____ I hereby enter a plea of **NOT GUILTY** and request that my trial be set before:

_____ the Judge and I waive my right to a trial by jury **OR** _____ I want a trial by jury

*A plea of NOT GUILTY means you contend that you are not guilty of the charge filed against you. And, your case will be set for a pre-trial hearing with the Prosecutor.

Complete the information below AND forward a copy of your current photo identification to court@newbraunfels.gov.

Print Legibly

Mailing Address:_____**Apt/Suite/Lot#:**_____

City:_____**State:**_____**Zip Code:**_____

Cell Phone:_____**Home Phone :**_____

Email Address:_____

Date of Birth:_____ **Driver's License/ID #**_____

By my signature, I affirm that all information above is true and correct AND, I acknowledge that, should I **Fail to Appear** at the dockets associated with my plea, the result may be additional changes being filed and warrants issued for my arrest.

Signature:_____**Date**:_____

(Defendant or Attorney for the Defendant)