CITY OF POST -
Municipal Court
106 South Broadway
Post, Texas 79356

Payment Plan Agreement Request Form

I, _____have been charged with the offense of _____in the Municipal Court of the City of Post.

I understand that I have the right to a jury trial and do waive that right. I do hereby enter my appearance to the offense charged and agree to pay the fine and costs the judge assesses.
I enter my plea of:

☐ No Contest- I understand that my plea of No Contest will have the same force and effect as a plea of guilty on the judgment of the court.
☐ Guilty

I request that the Court grant me a payment plan agreement to pay the fine and costs assessed. I understand that the Court is required to assess an additional court cost of $15.00 as per (Sec. 133.103 Local Government Code).

I understand that the Court will only mail a 1st and Final Notice in the event that I miss a scheduled payment. If payments are not made in a timely manner, then a capias pro fine warrant may be issued for my arrest. The warrant will be issued for the remaining balance of all fines and costs and will include a $50.00 warrant fee, a $10.00 failure to appear fee and a collections fee of 30%.

Defendant Information

Name _____

Address_____

City_____

State & Zip Code_____ ☐ I want to update my address with the court

Citation #_____ DOB_____

Driver's License # and State_____

_____ _____
Signature Date

- This form can only be used for ONE violation.
- Incomplete requests will NOT be accepted.