

# Gregg County Court Collections

*Application for extension of time for payment of fines, fees & court cost*

## Personal Information:

NAME: \_\_\_\_\_  
Last First Middle Nickname

ADDRESS: \_\_\_\_\_  
Street Apt./Lot City State Zip

MAILING ADDRESS: \_\_\_\_\_  
P.O. Box or Street Apt./Lot City State Zip

PHONE #: \_\_\_\_\_ CELL: \_\_\_\_\_ HOME: \_\_\_\_\_

If no phone, number where you can be reached: \_\_\_\_\_ NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver License: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Married: \_\_\_\_\_ Single: \_\_\_\_\_ Separated: \_\_\_\_\_ Divorced: \_\_\_\_\_ Common Law: \_\_\_\_\_

If married, spouse's name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Are you currently a student? \_\_\_\_\_

Education: \_\_\_\_\_ (highest grade completed)

List of Names, Addresses & Phone Numbers of Two (2) Personal References:

1) \_\_\_\_\_  
Name Address Phone # Years Known

2) \_\_\_\_\_  
Name Address Phone # Years Known

**EMPLOYMENT, ASSETS, OBLIGATIONS:**

Employer: \_\_\_\_\_  
Name Address Phone Job Position How Long

Supervisor's Name: \_\_\_\_\_ Take Home Pay: \_\_\_\_\_ Pay Days: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Take Home Pay: \_\_\_\_\_ Pay Days: \_\_\_\_\_

Please check any other sources of income you receive and the amount(s) per month:

Welfare \$ \_\_\_\_\_ Medicaid \$ \_\_\_\_\_ Retirement \$ \_\_\_\_\_ Social Security \$ \_\_\_\_\_

Unemployment \$ \_\_\_\_\_ Disability \$ \_\_\_\_\_ Food Stamps \$ \_\_\_\_\_

Other: \_\_\_\_\_

Automobile(s): Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Do you own a home or other real estate? Yes: \_\_\_\_\_ No: \_\_\_\_\_ If yes, where? \_\_\_\_\_

Bank Account Name: \_\_\_\_\_ Checking: \_\_\_\_\_ Savings: \_\_\_\_\_

Other than yourself, how many people do you directly support? \_\_\_\_\_

Monthly Expenses:

Rent/Mortgage \$ \_\_\_\_\_ Utilities \$ \_\_\_\_\_

Phone \$ \_\_\_\_\_ Food \$ \_\_\_\_\_

Child Support \$ \_\_\_\_\_ Child Care \$ \_\_\_\_\_

Alimony \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Other \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Other \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Please check one regarding your residence:

\_\_\_\_\_ Own your home

\_\_\_\_\_ Rent: Landlord Name: \_\_\_\_\_ Phone # \_\_\_\_\_

\_\_\_\_\_ Live with parents

\_\_\_\_\_ Other: Please explain \_\_\_\_\_

**AUTHORIZATION:**

I authorize Gregg County Court Collections to contact me through text messaging: YES NO

I authorize Gregg County Court Collections to contact me through email: YES NO

**ACKNOWLEDGEMENT AND DECLARATION:**

**Under penalty of perjury I hereby certify the foregoing as being a complete and accurate state of my current financial condition. I authorize the Court Collections Department of Gregg County, their employees and/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 knowledge that I formally request an extension of time for payment of the fine, court cost, attorney fees, and restitution now due and payable to the County of Gregg.**

\_\_\_\_\_

Defendants Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Collection Clerk Signature

\_\_\_\_\_

Date