FORT WORTH

MUNICIPAL COURT

TIME PAYMENT PLAN REQUEST AND ORDER

DEFENDANT'S CONTACT INFORMATION

Name:_____ Date of Birth: _____

Mailing Address:_____

City/State:_____ Zip: _____ Phone:_____

Email Address: _____

Case Number: _____ Fine Amount:$_____

DEFENDANT'S PLEA AND AGREEMENT

I plead **NO CONTEST** to the citations being placed on this payment plan, and I waive my right to a trial.

I have the ability to pay and agree to pay the amount listed below every month. If at any time I am unable to make a payment, I will go to the court before my next scheduled payment to ask about other options. I understand that the court may be able to offer me other ways to pay or earn credit toward my fine and court costs. I understand that it is my responsibility to notify the court of any change in my mailing address, phone number, or email address.

_____ _____

ATTORNEY'S SIGNATURE DEFENDANT'S SIGNATURE

FOR OFFICE USE ONLY

ORDER OF THE COURT

The defendant is ORDERED to satisfy their fines and court costs through a time payment plan with a starting payment of $_____ and a monthly payment of $_____ which will be due on the _____ day of every month until paid in full, starting _____. If any part of the fine or cost is paid on or after the 31st day from the date judgment was entered, a one-time $15 time payment fee will be added per case.

_____ _____

DATE JUDGE'S SIGNATURE

Contact Court by Phone: 817.392.6700
Pay in Person or by mail:
1000 Throckmorton St., Fort Worth, Texas 76102
Pay Online: courtpay.FortWorthTexas.gov
Pay by Phone: 682.999.3681

Court/Staff
Oldest Case_____

TOTAL: $ _____ # CITATIONS:_____

AC: _____☐_____ VERIFY: _____☐_____