



PAYNE SPRINGS MUNICIPAL COURT

19601 CR 2529
PAYNE SPRINGS, TX 75156
903-451-9110
FAX (903) 451-6505

Application for Payment Plan

Payment Plan Options: please select one "x"

- \$20 weekly,
 \$35 bi-weekly,
 \$65 monthly

CITATION(S) #: _____ (if unknown mark "all")

NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

PHONE/CELL#: _____

EMAIL: (optinal) _____

I am aware if said payments are not paid on time, A WARRANT(S) FOR MY ARREST MAY BE ISSUED BY THIS COURT. All fees associated with a warrant(s), (including collection fees) will be added to my obligation if payment is not paid in a timely manner.

Office hours are Monday thru Friday 8:00 am to 4:00 pm.

Signature: _____

Date: _____

Application may be mailed, brought into office, faxed, or emailed to : court@paynespringstx.com

If you are currently in warrants you will need to contact the Court. There are additional fees to pay.