

**REQUEST FOR PAYMENT PLAN**

THE STATE OF TEXAS	§	IN THE MUNICIPAL COURT
VS	§	CITY OF BALCH SPRINGS
_____	§	DALLAS COUNTY, TEXAS

Defendant's Name \_\_\_\_\_

Name \_\_\_\_\_

D/L # \_\_\_\_\_

Email \_\_\_\_\_

Citation # \_\_\_\_\_

Offense(s) \_\_\_\_\_

A payment plan will close as a Guilty Conviction. You are required to start the payment with this request and a minimum of \$100.00. You will be required to pay the remaining balance at the rate of \$100.00 per month until paid in full. A time payment fee of \$15.00 will be assessed to each case that is placed in this plan .

**To apply for a payment plan you must have this request postmarked on or before the 20th day from the issuance date of your citation.**

- This request form must be Signed by defendant.
- A copy of Driver's License or photo ID
- A self-addressed, stamped envelope
- A **cashier's check or money order** (made Payable to the City of Balch Springs) in the amount of \$100.00 **(NO PERSONAL CHECKS)**. If you want to know your total, please contact the Court at 972-557-6055 for your total amount owed.

Mail Correspondence to:  
City of Balch Springs  
3117 Hickory Tree  
Balch Springs, Texas 75180

Once we receive your paperwork, we will process it and will return an order pertaining to your payment plan, there will be a form that will need to be signed and returned. **Failure to include all required items will result in a denial of your request.**

**Waiver of Trial and Request for Payment Plan**

I, the above styled defendant in this case, hereby request a payment plan in this matter. In connection with this request, I enter my plea of no contest. I hereby waive my right to trial by Judge or Jury and discovery.

\_\_\_\_\_  
Defendant's Signature

\_\_\_\_\_  
Date