

**RUTHERFORD COUNTY CLERKS OF COURT
APPLICATION FOR PAYMENT PLAN**

Court: **CIRCUIT - CIVIL**

Case No. _____

Litigant's Name: _____

Home Address: _____

City, State, Zip: _____

Home Ph: _____ Cell Ph: _____

SSN: _____ DOB: _____

DL #: _____ State: _____

Other Household Residents:

Name: _____ Ph: _____

Name: _____ Ph: _____

My Employer's Name: _____

Employer's Address: _____

City, State, Zip: _____

Work Ph: _____ Supervisor: _____

Pay: \$ _____/hr x _____ hrs per week

Nearest Relative Not Living With You: _____ Relation: _____

Name: _____

Address: _____

City, State, Zip: _____

Home Ph: _____ Cell Ph: _____

Probation Officer: _____ Ph: _____

I receive or expect to receive money from the following sources:

AFDC \$ _____ per _____

SSI / Disability \$ _____ per _____

Veteran's Benefits \$ _____ per _____

Unemployment \$ _____ per _____

Worker's Comp \$ _____ per _____

Retirement \$ _____ per _____

My Assets are:

Automobile:

Year _____ Make _____ Model _____

Bank Accounts: _____ Checking _____ Savings

Bank Account at: _____ Account No. _____

If joint account, held with _____ Relation _____

My Living Expenses are:

Court Ordered Child Support / Alimony \$_____ per _____
 Child Care \$_____ per _____
 Rent/Mortgage (incl tax & ins) \$_____ per _____
 Groceries \$_____ per _____
 Electricity / Gas / Water / Phone \$_____ per _____
 Auto Payment / Gas / Maintenance \$_____ per _____
 Medical / Dental / RX \$_____ per _____
 Laundry / Dry-Cleaning \$_____ per _____
 Student Loans \$_____ per _____
 Clothing \$_____ per _____
 Recreation _____ \$_____ per _____
 Beauty / Barber Shop \$_____ per _____
 Insurance: Auto \$_____ per _____ Life \$_____ per _____
 Health \$_____ per _____ Renter \$_____ per _____

Personal Debts are: Amt Owed To Whom
 \$ _____
 \$ _____
 \$ _____

I declare under the penalty of perjury that the foregoing answers are true, correct, and complete. I further declare that I will notify the Rutherford County Court Collections Program Staff of any changes to the above information within five (5) days of such change:

Date: _____, 2011 _____
Litigant

PAYMENT AGREEMENT

I agree to pay \$_____ per (week / bi-weekly / monthly / twice monthly) beginning on _____, 2011 and continuing (weekly / bi-weekly / monthly / twice monthly) thereafter until paid in full, for an amount due as of this date of \$_____. I hereby acknowledge that if one (1) payment is missed and I do not contact or make arrangements with the Rutherford County Court Collections Program Staff prior to missing a payment, the Rutherford County Court Collections Program Staff may then submit a Wage Assignment Order to my employer and begin other collection activity, incurring additional costs for which I will be responsible.

Date: _____, 2011 _____
Litigant

Approved:
Laura Bohling, Circuit Court Clerk
Rutherford County Circuit Court

BY: _____, Deputy Clerk
Todd Vizzier or Mollie Slaybaugh