



REQUEST FOR PAYMENT PLAN TO PAY FINE

Instructions: You have 20 business days after receiving your citation to handle your citation. Complete this form and mail it to the clerk's office. **It is your responsibility to follow up with the court at 512-327-1862 to verify receipt of your request.**

Defendant's Name: _____

Citation #: _____

Offense(s): _____

DOB & DL #: _____

Address w/APT#: _____

City, State, Zip: _____

Cell phone number: _____ Work# _____

Email Address: _____

If an email address is provided your notice will be sent to you electronically.

I am requesting a payment plan and enclosed is the minimum payment of \$50.00 in the form of a money order or cashier's check. (initial) _____

I am entering a plea of: **No Contest** OR **Guilty** Indicate one or the other.

I do hereby waive my right to a jury trial and request to pay my fine in full. (initial) _____

I am aware that any violation that is placed on a payment plan will include **an additional \$15 Time Payment Reimbursement Fee per violation** as required pursuant to Sec. 51.921, Government Code. In accordance with this statutory requirement, if the Time Payment Fee was not assessed at the time of payment, you will be notified in writing.

Once your paperwork has been received and reviewed by the Court and you meet the eligibility for a payment plan you will be notified. Payment plans are \$75.00 a month until the amount is paid in full.

Defendant Signature: _____ Date: _____

*****METHODS OF PAYMENT AND CONTACT INFORMATION *****

Cash, Money Order, Cashier's Check

Payment by MasterCard, Visa, American Express or Discover in person or online at www.westlakehills.gov, if eligible

Phone: 512-327-1862 Email: court@westlakehills.gov

911 Westlake Drive, West Lake Hills, Texas 78746

DO NOT SEND CASH IN THE MAIL (No Checks)