

Jarrell Municipal Court

161 Town Center Blvd

Jarrell, TX 76537

Off: 512-746-1799

Fax: 512-746-2050

www.cityofjarrell.com

j.hage@cityofjarrell.com

REQUESTING HARDSHIP/INDIGENCY APPLICATION

Plea Required when requesting hardship/indigency consideration:

1. A plea form will print with the request for hardship/indigency application.
2. You must select either a plea of guilty or nolo contendere (no contest) and sign and date the plea form.
3. Mail or scan and e-mail plea form with the form requesting application.

Completing Request for hardship/indigency application.

1. If a question on the form does not apply to you, enter "N/A" on the line.
2. If you are married or living with someone who is assisting you with paying bills, you must also enter that person's information on the form.
3. If you have sources of other income, such as a second job, government assistance, child support, or social security, etc., you must also list that as income.
4. You must list the amount that you are paying for monthly bills. If you are not spending money on a certain item requesting an amount paid, enter "0" on the line.
5. You must sign the form. If you do not sign the form, the court will not complete the request.
6. Mail the plea and forms to the court before your appearance date or you may scan in the documents and e-mail them to j.hage@cityofjarrell.com.
7. You must include your telephone number and your employer's telephone number. If the court has questions about the information that you submitted, the court will contact you. If the court is unable to contact you, your request will not be processed.

EVERY LINE MUST BE COMPLETED. YOU CANNOT LEAVE ANY LINES BLANK OR YOUR REQUEST WILL NOT BE COMPLETE OR PROCESSED.

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PLEA FORM

STATE OF TEXAS

§

IN THE MUNICIPAL COURT

VS.

§

CITY OF JARRELL

§

WILLIAMSON COUNTY, TEXAS

CITATION NUMBER: _____

PLEA OF NOLO CONTENDERE I, the undersigned, do hereby enter my appearance on the complaint of the offense that I am charged with by the citation noted above in the Jarrell Municipal Court. I have been informed of my right to a jury trial and that my signature on this plea of nolo contendere (meaning "no contest") will have the same force and effect as a plea of guilty on the judgment of the Court. I do hereby plead nolo contendere to said offense as charged, waive my right to a jury trial or hearing by the Court, and agree to pay the fine and costs the judge assesses. I understand that payment of the fine and costs constitutes satisfaction of the judgment and waiver of the right to appeal. I understand that my plea may result in a conviction appearing on either a criminal record or a driver's license record.

Defendant's Signature Date

PLEA OF GUILTY I, the undersigned, do hereby enter my appearance on the complaint of the offense, that I am charged with by the citation noted above in the Jarrell Municipal Court. I understand that I have a right to a jury trial. I do hereby plead guilty to the offense as charged, waive my right to a jury trial or hearing by the Court, and agree to pay the fine and costs the judge assesses. I understand that payment of the fine and costs constitutes satisfaction of the judgment and waiver of the right to appeal. I understand that my plea may result in a conviction appearing on either a criminal record or a driver's license record.

Defendant's Signature Date

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Citation Number: _____

STATE OF TEXAS

§

IN THE MUNICIPAL COURT

VS.

§

CITY OF JARRELL

§

WILLIAMSON COUNTY, TEXAS

Print Name

APPLICATION FOR HARDSHIP/IDIGENCY

Said request will only be granted at the discretion of the Judge. (Dicha solicitud se concederá únicamente a discreción del Juez.)

Address (Dirección): _____

City (Ciudad) _____ Zip Code (Código postal): _____ Phone Number (Número de teléfono): _____

Driver's License # and State (Estado y número de licencia): _____

Email Address (Correo electrónico): _____

Employer (Empleo): _____ Job title (Oficio, profesión): _____

Employer's address (Dirección de su lugar de trabajo): _____

Salary (Sueldo)\$ _____ Per (por): _____ Employer's Telephone (teléfono trabajo): _____

Marital Status (Check One) (Estado civil (marque uno):

Married (Casado)

Single (Soltero)

Divorced (Divorciado)

Widowed (Viudo)

Employer (Empleo): _____ Job title (Oficio, profesión): _____

Employer's address (Dirección de su lugar de trabajo): _____

Salary (Sueldo)\$ _____ Per (por): _____ Employer's Telephone (teléfono de trabajo): _____

List the source and amount of any other income you receive (Indique la cantidad y la fuente de todo otro ingreso que reciba):

List all your dependents, their ages and their relationship to you (Anote el nombre, las edades y el parentesco de toda persona que usted mantiene económicamente):

List all bank accounts in your name or from which you may withdraw funds: (Identifique toda cuenta bancaria que esté a su nombre o de la cual puede sacar fondos): Name of Institution (Institución Bancaria) Address of Institution (Dirección de Institución)

Type of Account (Tipo de cuenta) _____

Account Balance (Saldo) _____

Estimate your average current monthly expenses for you and your family (Calcule sus gastos mensuales actuales y los de su familia) \$ _____

Your residence is (En el lugar donde vive, usted): _____

- Rented (paga alquiler/renta)
- Owned (es el dueño)
- Rent Free (no tiene que pagar alquiler/renta)

a. Home mortgage payment, rent or lot (Hipoteca de su casa o pagos de alquiler/rentar de su hogar o el terreno de la casa) \$ _____

b. Utilities (electricity, water, gas telephone) (Servicios de luz, agua, gas, teléfono) \$ _____

c. Food and sundries (Alimentos y víveres) \$ _____

d. Medical, dental, and medications (Gastos médicos, dentales y medicamentos) \$ _____

e. Insurance (auto, life, medical, homeowners/renters) (Pólizas de seguro con respecto a su auto, plan médico, casa, vida) \$ _____

f. Transportation (including car payments) (Transporte, inclusive pago(s) para su(s) auto(s) \$ _____

g. Taxes not deducted from wages or included in mortgage (Impuestos (siempre y cuando no se descuenten de su sueldo o no se incluyan en su hipoteca) \$ _____

h. Alimony or child support (Pagos de manutención o pensión alimenticia para sus hijos menores) \$ _____

i. Credit card payments (Pagos de tarjeta de crédito) \$ _____

j. Other expenses (use reverse side if necessary) (Otros gastos (si requiere más espacio use el dorso de la hoja)

\$ _____ \$ _____

\$ _____ \$ _____