## **FORM 1: TABLE OF COMMON OFFENSE AMOUNTS**

\*\*\*\*\*\*NOTE: JUVENILES 16 & UNDER MUST APPEAR IN PERSON FOR COURT WITH A PARENT OR GUARDIAN\*\*\*\*\*

\*\*\*\*ASSAULT / FAMILY VIOLENCE CASES MUST APPEAR IN PERSON FOR COURT\*\*\*\*

SPEEDING		DWLI	\$481.00	Run Stop Sign	\$284.00
1-5 mph over the limit	\$209.00	FMFR 1 <sup>st</sup> Offense	\$331.00	Disorderly Conduct	\$431.00
6-10 mph over the limit	\$234.00	FMFR 2 <sup>nd</sup> or more	\$581.00	Public Intoxication	\$431.00
11-15 mph over the limit	\$269.00	No Seat Belt	\$184.00	Theft	\$431.00
16-20 mph over the limit	\$309.00	Unrestrained Child	\$284.00	Possession of Drug Paraphernalia	\$484.00
21 or more over the limit	\$334.00	Expired Drivers License	\$231.00	FTA / VPTA	Contact Court
Expired Registration	\$231.00	No Driver's License	\$284.00	City Ordinance Violation	Contact Court

## \*PAYMENT PLAN REQUEST (\$50.00 per violation payment is required to start the payment plan)

(FAILURE TO REMIT PAYMENT WITH YOUR REQUEST WILL RESULT IN DELAY AND/OR DENIAL OF A PAYMENT PLAN)

Name (Print or Type as it appears on your driver's license)		Email Address Driver's Lic		icense Number	
Current Mailing Address	City, State, Zip		Telephone Number		
Date of Birth	Citation Number	Date of	Citation	Appear Date	
Initial your plea (only choose	one):				
1. I hereby: ACKNOWLI	EDGE that I have read the admonishment	of rights (front page), WAI	VE my rights, and enter a plea	of <u>GUILTY</u> .	
2. I hereby: ACKNOWL Contest).	EDGE that I have read the admonishment	t of rights (front page), WAI	VE my rights, and enter a plea	of NOLO CONTENDERE (No	
Initial each statement:					
The defendant states to th	e court that he/she is unable to pay	the fine(s), fee(s), and co	ost(s) in full at this time an	d requests the court grant	
him/her an extended period	od of time to pay them in full.				
The defendant acknowle	dges that he/she is required to ma	ke a payment in the am	nount of \$50.00 per viola	tion to start a payment plan	
agreement.					
(Make money order or ca	shier's check payable to Marlin Mu	nicipal Court)			
	ges that he/she must make a payment plan cannot exceed 180 days after		1 / 1	and cost(s) are paid in full	
The defendant acknowle	edges that the state adds a time pa	yment fee of \$15 to eac	ch violation if the full am	ount is not able to be paid	
within 30 days of first pa	ayment.				
The defendant agrees and	acknowledges that in the event that	he/she fails to comply v	with this payment plan agr	eement, he/she will be	
	the court and show cause why the c	ourt should not order the	e execution of all outstand	ing unpaid amounts against	
him/her.					
Defendant's Signatures		Data	A 4 T 1 .	1. 6	