**Section 1 – ACKNOWLEDGEMENT OF TERMS AND FAILURE TO COMPLY CONSEQUENCES *(s. 28.246(4), F.S.)***

* Each clerk of the circuit court shall accept partial payments for each case type for court-related fees, service charges, court costs, and fines in accordance with the terms of an established payment plan developed by the clerk.
* An individual seeking to defer payment of fees, service charges, court costs, or fines imposed by law or order of the court under any provision of general law shall apply to the clerk for enrollment in a payment plan.
* The clerk shall establish all terms of a payment plan, and the court may review the reasonableness of the payment plan.

I attest/confirm/swear that the information provided on this application is true and accurate to the best of my knowledge. I will abide by the terms of the payment plan and understand failure to do so may result in the suspension of my driver’s license for failure to pay a financial obligation and potentially my case(s) being referred to a collection agency and additional collection fees assessed.

* + Applicant Signature
  + Applicant Name (Print)
  + Date

**Section 2 – GENERAL INFORMATION**

* **I WISH TO ENROLL IN A PAYMENT PLAN** • Yes – *(s. 28.246(4)(b), F.S.)*
* I consent to email notifications (if applicable) • Yes
* I consent to text message notifications (if applicable) • Yes (data and message rates may apply)
* I consent to automated phone notifications (if applicable) • Yes (data and message rates may apply)
* First Name
* Middle Name
* Last Name
* Street Address
* Date of Birth
* Driver’s License Number or ID Number
* Email Address
* Cell Phone
* Other Contact Information

**Section 3 – FINANCIAL INFORMATION \* Flag this as something might need a statutory clean up.**

My net annual income pay is (Only fill in one)

*Total net annual income pay consists of total salary and wages, minus deductions required by law, including court-ordered support payments. – (s. 27.52(1), F.S.)*

* Weekly / Monthly / Annually

My income sources are:

* Salary and Wages $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Social Security Benefits $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Unemployment Compensation $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Union Payments $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Retirement/Pensions $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Trusts or Gifts $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Veterans’ Benefit $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Workers’ compensation $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Rental Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Dividends or Interest $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Support from family members $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly
* Other income not on the list $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐weekly ☐bi-weekly ☐semi-monthly ☐monthly ☐yearly

I have assets:

* Cash $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Homestead real estate $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Loan balance $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Non-homestead real estate $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Loan balance $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Car/Motor Vehicle $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Loan balance $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Boats/other tangible property $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Loan balance $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Money market accounts $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Bank/Savings account(s) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Stocks/bonds/Certificates of Deposit $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Check one: I DO NOT ☐ / I DO ☐ expect to receive more assets soon. The asset(s) and value(s) are \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
* How much can you afford to pay per month? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* How much can you afford to pay as a down payment today? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(If applicable)**

**Section 4 – ACCEPTABLE PAYMENT METHODS *(s. 28.42(2), F.S.)***

* Online at **(CLERK WEBSITE HERE)**
* By phone at **(CLERK PHONE NUMBER HERE)**
* By money order or cashier’s check. Please include your payment plan number/name and mail to: **(CLERK ADDRESS HERE)**
* In person at: **(CLERK ADDRESS HERE)**
* **{Any Other payment methods here}**

**Section 5 – PAYMENT PLAN TERMS**

* I understand that court-imposed financial obligations and civil penalties are penalties from my sentence or set by applicable law and I am required to pay for all fines, fees, and costs incurred from my case proceeding(s).
* I understand and agree to pay a **{one-time $25 or $5 per month}** administrative fee to establish a payment plan – *(s. 28.24(27)(b) or s. 28.24(27)(c), F.S.).*
  + If I fail to complete my payment plan and the clerk creates a new payment plan for me, I understand the clerk will assess an additional **{$25 or $5}** administrative fee each time a new payment agreement is established.
  + I further understand that **{CREDIT CARD VENDOR}** charges a fee of **{INSERT CREDIT CARD SERVICE CHARGE HERE}** per payment when making payments by credit card.
* I understand that it is my responsibility to make timely payments pursuant to the plan, regardless of e-notification reminders.
  + Payment is due no later than 11:59 p.m. **{Insert time zone here}** on the date given.
* I will timely update my address, cell phone number, email address and any other contact information with the Clerk’s Office so that I may receive notifications.
  + Failing to update my contact information may prevent me from receiving payment plan notifications.
* I will notify the Clerk’s office immediately with a request to modify my original payment plan if my financial situation changes.

**Section 6 – FAILURE TO COMPLY**

* Willfully failing to pay as agreed may result in the Florida Highway Safety and Motor Vehicles (FLHSMV) issuing an order suspending my driver license and my privilege to drive 20 days after the date the order of suspension is mailed *(ss. 318.15 or 322.245, F.S.).*
  + FLHSMV will send notification of suspension to the address they have on file.
* If I fail to establish a new payment plan, my license will remain suspended. If my case(s) remains unpaid after 90 days, my case(s) will be referred to a collection agency *(s. 28.246(6), F.S.).*
  + The collection agency may add a **{insert your county’s percentage}** percent fee to my outstanding balance, and I may need to pay the new balance through the collection agency.
* A failure to pay timely, which results in any criminal fine assessed by the court not being paid by the date established by the court, may result in the arrest of the defendant for failure to pay the fine.
* Criminal cases may be subject to a non-refundable lien fee of $22.00

**Section 7 – CLERK OFFICE FILLS OUT THIS SECTION**

* Beginning Balance based upon all fees and all anticipated fees, service charges, court costs, and fines.
* Term of the plan *(s. 28.42(2), F.S.)*
  + Payment Dates (weekly, every other week, bi-monthly, monthly)
    - Minimum Monthly Payment *(s. 28.42(2), F.S.)* **(if applicable)**
    - Down Payment **(if applicable)**
* Payment Plan #
* Case(s) #
* Reasonableness disclosure: A monthly payment amount, calculated based upon all fees and all anticipated fees, service charges, court costs, and fines, is presumed to correspond to the person's ability to pay if the amount does not exceed 2 percent of the person's annual net income, as defined in s. 27.52(1), F.S. divided by twelve. The clerk shall establish all terms of a payment plan, and the court may review the reasonableness of the payment plan.

|  |  |
| --- | --- |
| **Payment Calculation** | **Payment Plan #:** |
| Beginning Balance of Fines, Filing Fees, Service Charges, and Court Costs Due |  |
| Partial Payment Setup Fee or monthly fee | {$25.00 or $5.00 monthly} x number of months |
| **Total Amount Due** |  |

|  |  |
| --- | --- |
| **Payment Schedule** | |
| **Payment Due Date** | **Amount** |
| Amount Paid Today | $ |
| Balance for Payment Plan | $ |
| On the \_\_\_\_\_day of each **{month, or week or every other week, etc.},**  beginning \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_, until balance paid in full. | $\_\_\_\_\_\_\_\_a **{month or week or every other week, etc.}**  (Monthly payment is considered reasonable if it does not exceed two percent of annual net income divided by 12) |
| The total amount due is to be paid within \_\_\_\_\_ months. | |