



**Judge Clay Poynor**  
**Wise County**  
**Justice of the Peace, Precinct 4**  
**Payment Plan Application**

**ANSWER ALL QUESTIONS - DO NOT LEAVE ANY BLANKS - DO NOT REPEAT  
PHONE NUMBERS**

PERSONAL INFORMATION:

NAME: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Last First Middle

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ CELL: (\_\_\_\_) \_\_\_\_\_

DRIVER'S LICENSE / ID #: \_\_\_\_\_ SEX: (circle one) M / F

NAME & PHONE NUMBER OF THREE (3) PERSONAL REFERENCES:

NAME: \_\_\_\_\_ PHONE #: (\_\_\_\_) \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE#: (\_\_\_\_) \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE#: (\_\_\_\_) \_\_\_\_\_

EMPLOYMENT:

EMPLOYER'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PHONE#: \_\_\_\_\_ SUPERVISOR'S NAME: \_\_\_\_\_

Acknowledgment and Declaration: Under penalty of perjury I hereby certify that all of the above information is true and correct to the best of my knowledge. I also understand that information on this application may be verified by the Ellis County Justice Court, their employees or agent and that deliberate misrepresentation of the information may require prosecution. I understand this investigation could include direct verification of all information given and the obtaining of reports from credit agencies. I also certify that I will keep you informed of all changes in address and phone numbers.

\_\_\_\_\_  
 Defendant's Signature                      Date    Clerk    Date

Office Use Only	<input type="checkbox"/> Home <input type="checkbox"/> Call <input type="checkbox"/> Work (call / visual) <input type="checkbox"/> Ref #1 <input type="checkbox"/> Ref #2
Staff Initial	
Date	