

THE COLONY MUNICIPAL COURT
5151 N Colony Blvd, The Colony, TX 75056
www.thecolonytx.gov
APPLICATION FOR EXTENSION OF FINE AND COURT COST

NAME: _____
(Nombre) Last First Middle

OTHER NAMES USED (MAIDEN) _____

STREET ADDRESS: _____
(Direccion Fisica) CITY STATE ZIP

MAILING ADDRESS: _____
(Direccion De Envio) CITY STATE ZIP

CELL PHONE: _____ HOME PHONE: _____

DOB: _____ DL# _____ EMAIL _____

EMPLOYER: _____ EMPLOYER PHONE: _____

EMPLOYER ADDRESS: _____
(Direccion De Empleo) CITY STATE ZIP

\$ / HOUR _____ \$ / SALARY _____ \$ / TIPS _____

PAY FREQUENCY: WEEKLY _____ BI WEEKLY _____ MONTHLY _____ OTHER _____

IF UNEMPLOYED – FOR HOW LONG? _____

IF UNEMPLOYED – HOW ARE YOUR BILLS PAID? _____

DO YOU ATTEND HIGH SCHOOL, COLLEGE OR TRADE SCHOOL?

YES _____ NO _____ FULL TIME _____ PART TIME _____

NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____
(Direccion) CITY STATE ZIP

I understand that if I carry a balance more than 30 days an additional one time Time Payment Fee of \$15.00 will be added to any violation with an outstanding balance. _____ Defendants Initials

I understand that if the payment due date is not met, a Warrant for my Arrest may be issued and additional charges may be filed. A \$50.00 Warrant Fee will be added to each citation that has a remaining balance that is owed to the The Colony Municipal Court. _____ Defendants Initials

DATE: _____ SIGNATURE: _____