

Virginia:

In the Circuit Court of the City of Richmond, John Marshall Courts Building

**MOTION FOR COURT APPROVAL OF A PAYMENT PLAN  
FOR FINES AND COSTS**

Pursuant to §19.2-354 and §19.2-354.1 of the Code of Virginia

Commonwealth of Virginia,

v.

Full Name: \_\_\_\_\_,  
*Defendant.*

Case Number(s) for the matters that resulted in the owed fines and costs:  
\_\_\_\_\_.

COMES NOW the Defendant, *pro se*, and hereby moves this Honorable Court pursuant to §19.2-354.1 and §19.2-354(C) of the Code of Virginia to enter a payment plan for fines and costs:

- To enter a Deferred Payment Agreement to pay the entire amount on/before \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mo./day/yr.).
- To enter a Modified Deferred Payment Agreement to pay the entire amount on/before \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mo./day/yr.) and the Defendant agrees to use best efforts to pay \$ \_\_\_\_ /mo. beginning \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mo./ day/yr.).
- To enter an Installment Payment Agreement to pay \$ \_\_\_\_ /mo. beginning \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mo./day/yr.).

The Defendant acknowledges receipt of the required Notice of Payment Alternatives for Fines and Costs outlining the terms and conditions of a payment plan, including the consequences of default. The Petitioner further acknowledges that if a payment plan is authorized by Order of this Court, there is no actual payment agreement until the Defendant has signed the Payment Agreement, form CC-1379, which may be obtained and signed by appearing in person at the Office of the Clerk.

\_\_\_\_\_  
Signature of Defendant.  
\_\_\_\_\_  
\_\_\_\_\_  
Mailing address of Defendant.

Certificate

I hereby certify that a true and exact copy of the forgoing motion was (circle one) hand-delivered/mailed first-class to the Office of the Commonwealth's Attorney at 400 N. 9<sup>th</sup> Street, Suite 100, Richmond, VA 23219 on this \_\_\_\_ day of \_\_\_\_\_ (month), \_\_\_\_\_ (year).

\_\_\_\_\_  
Signature of Defendant.

**PETITION FOR PAYMENT AGREEMENT  
FOR FINES AND COSTS OR  
REQUEST TO MODIFY EXISTING AGREEMENT**

Case No(s) .....

Commonwealth of Virginia VA. CODE §§ 19.2-354.1, 19.2-355

General District Court  Circuit Court  
 Juvenile and Domestic Relations District Court

CITY OR COUNTY .....

COURT ADDRESS .....

Commonwealth of Virginia V. ....  
 ..... DEFENDANT/JUVENILE

ADDRESS OF DEFENDANT/JUVENILE .....

SOCIAL SECURITY NO. ....

CITY STATE ZIP TELEPHONE NO. ....

- I respectfully ask the court to allow me to pay the fines, costs, forfeiture, restitution (if not otherwise ordered) and/or penalty owed of \$ ....., plus any additional court-appointed attorney fee, if applicable,  
 in periodic payments OR  
 in one payment due in full on a future date  
 and I shall try to make periodic payments until that future date AND/OR  
 by doing community service work to earn credit for finest and costs only, if available.

I understand that I am required to make restitution payments if the judge ordered a separate payment schedule for restitution.

- I respectfully ask the court to change my current payment agreement  
 as my sole financial resource is a social security benefit or supplemental security income and I am exempt from making payments.  
 for the following reasons:

Court Debt Owed in Other Courts:

- I currently owe unpaid fines, costs, forfeiture, restitution, and/or penalty in ..... other courts.  
 I owe a total of \$ ..... in those other courts.  I do not know the total of unpaid court debt owed.  
 I pay a total of \$ ..... per month towards that unpaid court debt.  
 I do not have unpaid court debt in other courts.

Financial Information:

- The information provided to this court by defendant on Form DC-333, FINANCIAL STATEMENT – ELIGIBILITY DETERMINATION FOR INDIGENT DEFENSE SERVICES, as previously submitted, is unchanged.

OR

- This information is provided to this court below in support of this Petition or Request:

Public Assistance:

- I currently receive the following type(s) of public assistance:  
 TANF \$ .....  Medicaid  Supplemental Security Income \$ ` .....  
 SNAP (food stamps) \$ .....  Other (specify type and amount) .....  
 I do not receive public assistance.

Employment:

- I am employed.  I am not currently employed but I receive social security of \$ ..... per month.  
 I am not currently employed and it has been ..... months since I was last employed.

Employer(s)

Occupation

Defendant .....  self-employed .....  
 Spouse .....  self-employed .....

Number of Dependents .....

**Household Net Income:**

	<u>Defendant</u>	<u>Spouse</u>
Take-Home Pay (after taxes, etc.)	\$ .....	\$ .....
Pay Period (weekly, every 2 weeks, twice monthly, monthly)	\$ .....	\$ .....
Other Income Sources (specify) .....	\$ .....	\$ .....
Income Contribution of Dependents	\$ .....	\$ .....
<b>TOTAL NET INCOME =</b>		<b>\$ .....</b>

Case No(s) .....

	<u>Defendant</u>	<u>Spouse</u>
<b>Assets:</b>		
Bank Accounts/Cash on Hand	\$ .....	\$ .....
Other Assets (specify)		
..... with a		
..... value of .....	\$ .....	\$ .....
Real Estate - \$ .....	\$ .....	\$ .....
NET VALUE		
Motor		
Vehicles		
..... YEAR AND MAKE		
..... YEAR AND MAKE		
Other Personal Property: (describe) .....	\$ .....	\$ .....
<b>TOTAL ASSETS =</b>		<b>\$ .....</b>

<b>Debts Owed (amount paid per month):</b>		
Car payment	\$ .....	\$ .....
Rent/mortgage payment	\$ .....	\$ .....
Credit card payments	\$ .....	\$ .....
Other monthly payments (not including court debt payments)	\$ .....	\$ .....
<b>TOTAL MONTHLY DEBTS =</b>	<b>\$ .....</b>	

<b>EXCEPTIONAL EXPENSES (Total Exceptional Expenses of Family)</b>		
Medical Expenses (list only unusual and continuing expenses) .....	\$ .....	
Court-ordered child support payments/alimony .....	\$ .....	
<input type="checkbox"/> deducted from paycheck <input type="checkbox"/> not deducted from paycheck		
Child-care payments (e.g. day care) .....	\$ .....	
Other (describe):		
.....	} \$ .....	
<b>TOTAL EXCEPTIONAL EXPENSES</b>		<b>\$ .....</b>

**THIS STATEMENT IS MADE UNDER OATH, ANY FALSE STATEMENT OF A MATERIAL FACT TO ANY QUESTIONS CONTAINED HEREIN SHALL CONSTITUTE PERJURY UNDER THE PROVISIONS OF VA. CODE § 18.2-434. THE MAXIMUM PENALTY FOR PERJURY IS CONFINEMENT IN THE STATE PENITENTIARY FOR A PERIOD OF TEN YEARS.**

I hereby state that the above information is correct to the best of my knowledge.

..... DATE ..... DEFENDANT

Sworn to and signed before me this

..... day of ....., 20 .....

CLERK  DEPUTY CLERK

**FOR NOTARY PUBLIC'S USE ONLY:**

State of .....  City  County of .....

Acknowledged, subscribed and sworn to before me this ..... day of ....., 20 .....

..... NOTARY REGISTRATION NUMBER ..... NOTARY PUBLIC

(My commission expires: .....)

**ORDER FOR REQUEST TO MODIFY EXISTING PAYMENT AGREEMENT**

Upon request to modify an existing payment agreement,

the request is granted based upon a good faith showing of need, and the new payment agreement is set forth on form

DC-210, FINES AND COSTS PAYMENT AGREEMENT/ACKNOWLEDGMENT OF DRIVER'S LICENSE STATUS.

CC-1379, ACKNOWLEDGMENT OF SUSPENSION OR REVOCATION OF DRIVER'S LICENSE/ORDER AND NOTICE OF DEFERRED PAYMENT OR INSTALLMENT PAYMENTS.

the request is denied, and the current payment agreement continues in full force and effect.

..... DATE .....  JUDGE  CLERK  DEPUTY CLERK