



STATE OF TEXAS § MUNICIPAL COURT
 VS § CITY OF FOREST HILL
 _____ § TARRANT COUNTY, TEXAS

PERSONAL INFORMATION

Name: _____ Telephone Number: _____

Address: _____
 Street Address City, State Zip

Mailing Address _____
 Street Address City, State Zip

Birth Date: ____ / ____ / ____ Social Security Number: _____ - _____ - _____ Driver's License # _____

Marital Status (Check One): Married Single Divorced Widowed

Spouse's Name: _____

REFERENCES: All phone numbers will be verified.

Nearest Relative NOT Living With You: _____ (Relationship) _____

Address: _____

Phone Number _____

List Name, Address & Phone number of Two (2) Personal References:

 Name Street Address City, State Zip Area Code Phone Number

 Name Street Address City, State Zip Area Code Phone Number

EMPLOYMENT INFORMATION

Employer: _____ Job Title: _____

Employer's Address: _____

Salary: \$ _____ per _____ Employer's Telephone Number: _____

Name of Supervisor: _____ Supervisor Direct Phone Number: _____

Spouse's Salary: \$ _____ per _____

Spouse's Employer: _____ Spouse's Job Title: _____

List the source and amount of any other income you receive & amount(s): (do not list bills that are listed on the back of this form)

Unemployment	\$ _____	Utility Assistance	\$ _____	Do any of your dependents receive free or reduced lunches? Yes / No
Social Security	\$ _____	Food Stamps	\$ _____	
Disability	\$ _____	Rental Property	\$ _____	Do you or your legal dependents receive Medicaid or Medicare? Yes / No
Retirement	\$ _____	Other	\$ _____	
Child Support	\$ _____	Other	\$ _____	

Other than yourself, list the name and relationship of the person's that you directly support:

NAME	RELATIONSHIP	NAME	RELATIONSHIP
1)		4)	
2)		5)	
3)		How many of these dependents are listed on your federal taxes? _____	

RESIDENCE:

Landlord or Bank	Address	City, State	Zip	(Area Code) Number
Mortgage \$	Rent \$	Parents \$	Other \$	

MONTHLY LIVING EXPENSES:

Electric / Gas \$	Water \$	Phone / Cell \$	Food \$
Medical \$	Insurance \$	Gasoline \$	Childcare \$
Other \$	Explain:	Other \$	Explain:

List All Other Creditors (Credit Cards, Bank Loans, Finance Compalines, ... Use a separate sheet of paper if necessary.)

Company:			Mo. Payment \$
Company:			Mo. Payment \$
Company:			Mo. Payment \$
Automobile: Year	Make	Model	Mo Payments \$
Automobile: Year	Make	Model	Mo Payments \$

Acknowledgment and Declaration:

- I promise that until my fines have been paid in full, I will notify this Court in person or by first-class mail of any changes of my address or telephone number at the following address 3219 CALIFORNIA PKWY FOREST HILL, TX 76119 within five (5) days of the change.
- I affirm all the information in this application is true, correct, and complete to the best of my knowledge and belief and I have given a complete and accurate disclosure of my income and financial status. I authorize the City of Forest Hill Court, employees or agents, to conduct a complete and thorough investigation of any of the above statements.
- I understand this investigation could include direct verifications of all information given and obtaining of reports from credit reporting agencies.
- I understand that submitting false financial information to the Court constitutes the crime of tampering with a governmental record, punishable by incarceration and/or the imposition of a fine. (Sec. 37.10, Penal Code) I swear that all the information in this application is true, correct, and complete to the best of my knowledge and belief.

Date: _____ Defendant's Signature: _____

Sworn and subscribed before me this day _____ of _____, 20__.



(Judge) (Clerk) (Deputy Clerk)