



PAYMENT PLAN REQUEST FORM

MESCALERO APACHE TRIBAL COURT

1. This is my request to pay my fines in payments.

My name is:

Mailing address:

Phone:

2. On (date) _____, the court made the decision that:

I owe (total amount): \$ _____

To: (name of party you must pay): _____

Mailing address: _____

3. I am asking for permission to make payments, instead of paying the full amount all at once, because (explain): _____

If your answer will not fit in the space above, check this box and attach your answer on a separate sheet of paper.

4. I ask the court to allow me to make payments on the following terms:

a. Payment of \$ _____, on the _____ day of each Month Week Bi-weekly

Starting (date) _____ until the balance is paid in full. (1st & 15th)

Note: Payments cannot exceed 10 installments.

Warning! If any payment is not made in full and on time, the court will cancel the payment plan and the entire unpaid balance will become due and collectible. You may be subject to further sanctions by the court.

I declare under penalty of perjury under the Mescalero Apache Tribal Code 10-22-1 that the information above is true and correct.

Signature

Date:

Printed Name

Phone Number

COURT USE ONLY

Approved as requested

Approved with Modification

Denied

Reason: _____

Printed Name

Signature