

REFERENCE #2 : NOT LIVING IN THE SAME HOUSEHOLD

NAME: _____

ADDRESS: _____

PHONE: _____

YOUR INITIAL BY EACH OF THE FOLLOWING STATEMENTS INDICATES THAT YOU HAVE READ THE STATEMENT, UNDERSTAND IT, AND AGREE TO IT.

_____ I promise that until my fees are paid in full, I will notify this Court in person or by mail of any changes of my address or telephone number at the following address: BURNET MUNICIPAL COURT, P.O. BOX 1369, BURNET, TEXAS 78611 within five (5) days of the change.

_____ I understand that until my fees are paid in full I have a continuing obligation to notify the court of any changes in my financial status that may hinder my ability to satisfy the judgment or help me satisfy the judgment.

_____ I understand that no extensions to pay will be given. (You must pay on the due day your payment plans states and for the amount that it states.)

_____ I understand that a \$25.00 time payment fee has been added to each violation 31 days from the date that I submitted my reply form.

I UNDERSTAND THAT FAILURE TO COMPLY WITH THE TERMS WILL RESULT IN THE FOLLOWING:

_____ I understand a denial of renewal will be sent to DPS so you cannot renew your Driver's License if your fees are not paid in full.

_____ I understand that a capias pro fine warrant will be issued for the balance of my fees and any applicable fees if you default on your payment plan. Also no notice will be mailed before a warrant is issued if you have defaulted on your payment agreement.

_____ I understand that I can be sent to a collection agency to an unpaid balance of fees (increase of 30%)

Date: _____ Defendant's Signature: _____

Defendant's printed name: _____

Return to:
BURNET MUNICIPAL COURT
P.O. BOX 1369
BURNET, TX 78611
512-756-2822
512-756-8560 fax
court@cityofburnet.com