

Case number(s) \_\_\_\_\_

## Tempe Municipal Court Financial Screening Application (Confidential)

**INSTRUCTIONS:** You are required to complete this form legibly and completely. Do not leave any blanks. Court personnel may verify the information through national credit agencies.

Your Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver's License # \_\_\_\_\_

Mailing Address \_\_\_\_\_ Apt# \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email address \_\_\_\_\_

Employer Name \_\_\_\_\_ Date of next check \_\_\_\_\_

Status: (Circle)    Single    Married    Living w/ spouse    Married but separated    Divorced

In addition to yourself, how many other dependents do you support? \_\_\_\_\_ Age of dependents \_\_\_\_\_

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**INCOME: List all household income****Monthly**

Self: Wages, Salaries, Self-Employment Income \$ \_\_\_\_\_

Other: Wages, Salaries, Self-Employment Income \$ \_\_\_\_\_

Alimony or maintenance received \$ \_\_\_\_\_

Other:    **Unemployment**                      **Welfare benefits**  
(circle)    **Disability benefits**                      **Veteran's benefits**  
                    **Social Security benefits**                      **Worker's compensation**                      \$ \_\_\_\_\_

Food Stamps \$ \_\_\_\_\_

Child support \$ \_\_\_\_\_

**Total Income****\$ \_\_\_\_\_**

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**EXPENSES: List all expenses****Monthly**

Rent or house payment \$ \_\_\_\_\_

Groceries \$ \_\_\_\_\_

Utilities -water, electric, gas \$ \_\_\_\_\_

Telephone \$ \_\_\_\_\_

Medical Payments -doctor, dentist, medicine \$ \_\_\_\_\_

Child care / Child support \$ \_\_\_\_\_

Vehicle insurance / Vehicle payment \$ \_\_\_\_\_

Credit Cards      Limit \$ \_\_\_\_\_      Balance \$ \_\_\_\_\_      \$ \_\_\_\_\_

Other Financial Obligations \$ \_\_\_\_\_

**Total Expenses****\$ \_\_\_\_\_**

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**TURN OVER TO COMPLETE**

**COMMENTS:**

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**NOTICE**

By providing your cell phone number you are granting permission to receive texts and other communication regarding court dates, pending payments and other relevant information about your case(s). Normal text and SMS rates apply. Please contact the court should you desire to opt out of this service.

**CREDIT INQUIRY NOTICE**

As a part of the application process through the Tempe Municipal Court, there may be a credit bureau inquiry on all \*qualified applicants. If, from the inquiry, it is determined that the applicant has available credit to satisfy the ordered fines and sanctions, the applicant will not qualify for a payment plan and the entire amount will be due 5 PM the day the Order to Financial Services was given.

**\*Qualified applicant:** Those having the ability to qualify for a credit account; 18 years of age and older.

I swear, under penalty of perjury that all statements and information contained herein are true and complete. I authorize the City of Tempe to verify any information contained herein with any credit bureau or investigative agency or any other source. I agree to abide by the terms set forth in a deferred payment agreement. In the event I do not comply with the terms and payments are not paid by the due date, I understand that the Court will demand the balance due and payable immediately and may issue an order to appear in Court to explain my failure to comply. I understand that if any of my charges are criminal and I fail to appear, a warrant will be issued for my arrest. I also understand that for civil traffic delinquencies, a \$50 fee will be added to each civil charge and a default notification will be sent to the Arizona Motor Vehicle Department which will result in the suspension of my driving privileges. I understand that the Court will refer my outstanding and delinquent balance due to a collection agency and notify the Arizona Department of Revenue (ADOR) to take any legally appropriate collection action against me, my income or my property. If the Court refers my outstanding balance to a collection agency and ADOR, I understand that I am responsible to pay the cost of collection and authorize the Court to add said cost to my balance due.

**WARNING: IT IS A FELONY TO INTENTIONALLY SUBMIT FALSE INFORMATION TO A COURT. THE MAXIMUM PENALTY IS A \$150,000 FINE AND/OR 1-1/2 YEARS IN PRISON.**

Defendant \_\_\_\_\_

Date \_\_\_\_\_

\*\* If a minor, signature of legal parent or guardian