

## **CIRCUIT COURT OF PEPIN COUNTY**

## DEFERRED PAYMENT APPLICATION CASE $N^{\underline{o}}$

APPLICANT INFORMATION					
Applicant's Name (First, Full M	liddle Name	, Last)			
Address:			DL Number		
			State 7:		
City			State		Zip
Home phone	ne phone Date of birth		Social Security Number:		
Trome phone	phone But of onth		Social Security Frances:		
Number of your own children un	lder age 18	who reside with you:			
(natural or adopted, not stepchild	lren)	·			
EMPLOYMENT					
Name of Employer					
1 7					
Address of Employer					
City			State		Zip
Hourly wage per hour		Hours worked per week			
Overtime, bonus, other income			Other Court Ordered Payments (child support etc)		
ASSETS					
Real Estate Fair Market Value			Mortgage balance		
List vehicles			Vehicles value less lien		
List venicies			venicies value less nen		
Amt in cash, bank accts:			Amt in IRAs, 401k, other retirement accts		
,					
Other assets and value					
PAYMENT PLAN					
State your proposed payment plan					
The information provided on this application is true and accurate under penalty of perjury					
as though sworn to un	der oath	1.			
Datad: Signad:					
Dated: Signed:					

This information may be used to intercept your state tax refund for unpaid fines, fees, forfeitures, parking citations, or other debts if you fail to pay a judgment when due. §71.935, Wis. Stats. Your social security number may be used for this purpose. Disclosure of your social security number is voluntary on your part. It assists us in confirming your identity and in using the Department of Revenue o collect an unpaid judgment rather than using an arrest warrant or other means.