

INDIGENT HEARING REQUEST – WEB

Defendant's Name: _____

Mailing Address: _____

City, State, Zip: _____

Phone #: _____

Date of Birth: _____ DL# _____

I request an INDIGENT HEARING on the following citation(s) and offense(s) listed below.

<u>Citation #</u>	<u>Offense</u>
_____	_____
_____	_____
_____	_____
_____	_____

I the above named Defendant request an indigent hearing for the above referenced case(s).

I understand I am required to complete in full the Glenn Heights Court Financial Statement and provide it completed to the Judge at the hearing with all supporting documentation.

I understand that a hearing will not take place if all required documentation is not brought to the scheduled Indigent Hearing.

I understand that a notice will be mailed to the address I provided above and **understand** that if this written request is not signed and/or is incomplete the request is automatically denied (no hearing will be scheduled).

I understand that if I am not found indigent (individuals living at or below 125% of the federal poverty level) then I will be expected to make payment at the hearing.

Defendant's signature

Date

If the case(s) are in warrant status they will remain in effect until Judge orders the warrant(s) recalled. Any case(s) delinquent by 60 days or more, will be turned over to a collection agency and an additional 30% fee will be assessed.

Return the signed request to:

- 1. 1938 S. Hampton Rd., Glenn Heights, Texas, 75154.**
- 2. Fax: 972-223-9307 (you may call to confirm you request was received @ 972-223-1690 x275)**
- 3. Scan and email to Larissa.Ward@glennheightstx.gov**