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|--|-------------------------------|---------------------------------------|
| State of Tennessee | General Sessions Court | Hamilton County |
| Request to Make Payments (Motion and Affidavit for Installment Payments and Order) | | Case No. _____ (Must Be Completed) |
| Plaintiff/Creditor _____ <small>(Name: First, Middle, Last of person/company that filed lawsuit)</small> | | |
| Defendant/Debtor _____ <small>(Name: First, Middle, Last of the other person)</small> | | |

You must go to Court on (Court Date): _____ **at** _____ a.m. p.m.

Courtroom: 600 Market Street, 2nd Floor, Chattanooga, Tennessee 37402 – Courtroom 6

Reset Date: _____ **Time:** _____ a.m. p.m.

To ask the court to allow you to make payments on this case, you must:

- Send a copy of your completed form to the Plaintiff/Creditor or his/her lawyer, and
- Go to a court on the date listed above that the clerk's office gave you.
- Do not agree to pay more than you can afford. At this time, the law allows you to keep at least \$217.50 of your weekly paycheck. If your weekly pay is more than \$217.50, the amount that can be taken (garnished) is the difference between your net weekly pay and \$217.50 or 25% of your net wage, whichever is greater.

① I ask the court to allow me to make payments of (amount): \$ _____ beginning _____ (date) toward this judgment, pursuant to Tennessee Code Annotated 26-2-216.
 This amount will be paid (check **one**): Weekly Bi-weekly Monthly

② **Your Information**

Full Name: _____

Address: _____
street address city state zip

Tel. (home): _____ (work): _____ (cell): _____

Birth date (mm/dd/yy) _____ Email address: _____

③ **Dependents**

List your dependents below.

| Name | Age | Relationship | Name | Age | Relationship |
|------|-----|--------------|------|-----|--------------|
| 1. | | | 4. | | |
| 2. | | | 5. | | |
| 3. | | | 6. | | |

④ **Employment:** If you are working now, fill out below. If not working now, check here:

Employer's name: _____

Employer's address and tel. #:

_____ street address _____ city _____ state _____ zip _____ tel #

How much do you earn after taxes are deducted?

\$ _____ each (check **one**): week month Other: _____

⑤ **Other Income:** List **any** other income that you get now or expect to get.

| Source of Income | How much do you get? | Source of Income | How much do you get? |
|--|----------------------|---|----------------------|
| <input type="checkbox"/> AFDC | \$ _____ / month | <input type="checkbox"/> Unemployment | \$ _____ / month |
| <input type="checkbox"/> Social Security | \$ _____ / month | <input type="checkbox"/> Worker's Comp. | \$ _____ / month |
| <input type="checkbox"/> Retirement | \$ _____ / month | <input type="checkbox"/> Other* | \$ _____ / month |
| <input type="checkbox"/> Disability | \$ _____ / month | <input type="checkbox"/> SSI | \$ _____ / month |

* Explain source of Other income here.

Other: _____

⑥ **Assets:** List all assets that you own separately, with your spouse or with someone else:

| | Fair Market Value | Money still owed | = |
|--|-------------------|------------------|----------------|
| 1. Car, truck, or other vehicle | | | \$ _____ |
| 2. Other car, truck, or other vehicle | | | \$ _____ |
| 3. House, condominium, land | | | \$ _____ |
| 4. Other house, condominium, land | | | \$ _____ |
| List all bank/financial accounts below: | | | |
| Bank name | | | Balance |
| 5. _____ | | | \$ _____ |
| 6. _____ | | | \$ _____ |
| 7. Cash | | | \$ _____ |
| Total: | | | \$ _____ |

Other: _____

⑦ **Expenses**

| | How much each month? | | How much each month? |
|---|----------------------|--|----------------------|
| <input type="checkbox"/> Rent/House Payment | \$ _____ | <input type="checkbox"/> Gas | \$ _____ |
| <input type="checkbox"/> Phone | \$ _____ | <input type="checkbox"/> Child Care | \$ _____ |
| <input type="checkbox"/> Groceries | \$ _____ | <input type="checkbox"/> Court-ordered Child Support | \$ _____ |
| <input type="checkbox"/> School Supplies | \$ _____ | <input type="checkbox"/> Transportation | \$ _____ |

| | | | |
|--------------------------------------|----------|---|----------|
| <input type="checkbox"/> Electricity | \$ _____ | <input type="checkbox"/> Medical/Dental | \$ _____ |
| <input type="checkbox"/> Clothing | \$ _____ | <input type="checkbox"/> Other | \$ _____ |
| <input type="checkbox"/> Water | \$ _____ | <input type="checkbox"/> Other | \$ _____ |

⑧ **Debts:**

| Who do you owe? | How much do you owe? | Who do you owe? | How much do you owe? |
|-----------------|----------------------|-----------------|----------------------|
| 1. | \$ _____ | 4. | \$ _____ |
| 2. | \$ _____ | 5. | \$ _____ |
| 3. | \$ _____ | 6. | \$ _____ |

⑨ List any other facts you want the court to know, such as unusual medical expenses, family emergencies, etc.

⑩ I declare under penalty of perjury under the laws of the State of Tennessee that:

- The information I have provided is true, correct, and complete.

Sign here: _____ Date: _____

Sworn and subscribed before me this _____ day of _____, 20_____.

Deputy Clerk or Notary Public

The defendant must pay court costs of: \$ _____

DO NOT FILL OUT THIS SECTION BELOW. THE JUDGE WILL FILL THIS SECTION OUT AT COURT.

- The court **denies** this Request because (judge will check all that apply):
- The defendant did not prove s/he has the right to make payments.
 - The defendant did not go to the court hearing for this case. This *Request* is dismissed.
- The court **approves** this Request because the defendant proved s/he has the right to make payments. Garnishment may be stopped when unpaid court cost is paid. It is the defendant's responsibility to obtain the "Notice of Garnishment:" form from the Clerk's office and get it to their employer. The defendant will pay as follows:
- Payments of: \$ _____, on the _____ day of each (month, week, other): _____ starting (date): _____ until (date of final payment): _____,
 - Payments will be made to (check one): Plaintiff or his/her lawyer Court Clerk
- This decision was made by (check one):
- The Plaintiff did not show up to court (Default)
 - After a court hearing.
 - By agreement of the parties.



A review of this decision is set for (Date) _____ at (Time) _____ a.m. p.m.

600 Market Street, 2nd Floor, Chattanooga, Tennessee 37402 – Courtroom 6

Judge's signature: _____ Date: _____