

(Insert court logo here)

ANYTOWN MUNICIPAL COURT
(replace with court name)

APPLICATION FOR TTEAP WAIVER

Defendant Name:

Case Number:

Date of Application:

Case Balance Due:

Person making Application:

Relationship to Defendant:

Would non-renewal of the vehicle registration pose an economic hardship to the registered owner or the immediate family of the registered owner? (check one)

Yes

No

If yes is checked above, please explain the extent of the hardship below and describe who would be affected:

Please explain why the failure to pay the amount due is not an intentional refusal to obey the order of the court:

Please explain the good faith efforts that have been made to obtain the monies required for the payment of the total balance due:

Reviewed by:

Date Waiver Granted or Denied:

Waiver Granted:

Waiver Denied:

Date: 12/15/03