

LOWER KITTITAS COUNTY DISTRICT COURT  
 COURT PAYMENT MANAGEMENT SERVICES, INC.  
 PAYMENT PLAN AGREEMENT

<b>Name</b>	1
<b>Case Numbers</b>	2
CPMS Account number	
<b>Fine/Costs/Penalties</b>	3
Set-up Fee	\$15.00
Total Amount Owing	4
<b>Monthly Payment</b>	5
<b>TOTAL REQUIRED TO SET-UP PAYMENT PLAN AGREEMENT (1st pmt &amp; set up fee)</b>	6

1. If all payments are made as agreed, the monthly payment plan cost shall be \$4.75 for a single case or \$8.25 for multiple cases.
2. The set-up fee and the first monthly pmnt must be paid before CPMS will set up the pmnt plan agreement.
3. If payments are not made as agreed upon, the monthly payment plan cost shall increase to \$7.75 for one case and \$11.25 for multiple cases for each month until the end of the payment plan.

All CPMS payments are due on the **10TH/25TH** day of each month following payment plan set up. Please include your CPMS account number when submitting payments.

You are welcomed and encouraged to make payments larger than the monthly minimum on your accounts or even pay the accounts in full early to avoid the monthly payment plan costs. LARGER PAYMENTS MADE ONE MONTH WILL NOT CHANGE OR LOWER YOUR MINIMUM PAYMENT DUE THE FOLLOWING MONTH.

IF PAYMENTS ARE NOT MADE AS AGREED UPON OR IF YOU FAIL TO KEEP CPMS UPDATED ON YOUR CURRENT ADDRESS AND PHONE NUMBER, YOU WILL BE REMOVED FROM THE PAYMENT PLAN AND THE FOLLOWING ACTIONS WILL BE TAKEN:

All amounts will become due immediately. Lower Kittitas County District Court may re-impose suspended portions of your fine/costs/penalties and will assess additional court costs pursuant to RCW 3.02.045. Your account will be referred to Dynamic Collectors, Inc. for full collection procedures. If this is a criminal matter, the court has the authority to issue a bench warrant for contempt of court and can assess fines or costs for contempt of court. If this is a traffic citation, the court will assess a \$52.00 penalty for failure to pay and notify the Department of Licensing, and your driver's license can be suspended until all amounts have been paid.

All payments are to be mailed to:

**Court Payment Management Services, Inc.**  
 750 S Market Blvd  
 Chehalis, WA 98532

\*\*\*\*\*WE ACCEPT CASHIERS CHECKS OR MONEY ORDERS ONLY BY MAIL AS WELL AS CASH IN OUR OFFICE\*\*\*\*\*

**Signature** \_\_\_\_\_

Address \_\_\_\_\_ City, St, Zip \_\_\_\_\_

Phone \_\_\_\_\_ SSN \_\_\_\_\_

CPMS/Court Representative approval \_\_\_\_\_

*This is an attempt to collect a debt. Any information obtained may be used for that purpose. This has been sent to you by a debt collection agency.*

# Court Payment Management Services, Inc.

## PAYMENT PLAN APPLICATION

750 S. Market Blvd, Chehalis, WA 98532 (360) 748-4784

### DEFENDANT INFORMATION

Name \_\_\_\_\_  
(last) (first) (MI)

Home address \_\_\_\_\_

Mailing address (if different) \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Home phone \_\_\_\_\_

Cell phone \_\_\_\_\_ Work phone \_\_\_\_\_

Date of birth \_\_\_\_\_ SSN \_\_\_\_\_

\_ Drivers License # \_\_\_\_\_

Employer name \_\_\_\_\_

Employer address \_\_\_\_\_

Employer phone \_\_\_\_\_

### ADDITIONAL CONTACT INFORMATION

Contact name \_\_\_\_\_ Contact phone \_\_\_\_\_

Contact address \_\_\_\_\_

### SPOUSE INFORMATION

Name \_\_\_\_\_  
(last) (first) (MI)

Home address (if different) \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Home phone \_\_\_\_\_

Cell phone \_\_\_\_\_ Work phone \_\_\_\_\_

Employer name \_\_\_\_\_

Employer address \_\_\_\_\_

*THIS IS AN ATTEMPT TO COLLECT A DEBT. ANY INFORMATION OBTAINED MAY BE USED FOR THAT PURPOSE. THIS HAS BEEN SENT TO YOU BY A DEBT COLLECTION AGENCY.*