

Additional information in support of Motion for Extension of Time to Pay Fine

PLEASE COMPLETE IN FULL

Name																				
Home Address																				
Email Address																				
Phone Number	Home					Cell					Work									
Are you employed:	Yes			No			Other Source of Income													
Name of Employer																				
Address																				
Telephone																				
Type of Job	Full-time				Part-time				Seasonal				Casual				Hours per week			
Job Title																				
Dependents	How many?				Age(s)				Name of Spouse											

Monthly Expenses		Monthly Income (all sources – please specify)	
EXPENSE	AMOUNT	SOURCE OF INCOME	AMOUNT
Rent/Mortgage	\$		\$
Car Loan	\$		\$
Insurance	\$		\$
Credit Card(s)	\$		\$
Child Support	\$		
Utilities	\$		
Personal Loan(s)	\$		
Other			
Total Expenses	\$	Total Income	\$

I can make monthly payments toward my outstanding fine(s) each month	\$	on the _____ of each month
If my driver's licence is suspended or remains suspended, my family and I will be affected (explain):		
Other information which you feel is relevant to this application, such as current payment plan or reasons for request for change of payment plan		

I confirm that the information set out above is true and correct and that this information is being requested by the Court and will be relied on by the Court to determine whether or not to grant this extension. I acknowledge that this information is collected under authority of the Provincial Offences Act and that if payments are not made as proposed, this information may be used to enforce current or future defaulted POA fines.

Date: _____ **Signature:** _____