

Motion for Extension of Time to Pay Fine

Defendant's Name: _____

Defendant's Date of Birth (dd/mm/yy): _____

Defendant's Address: _____

Defendant's Telephone: _____

Defendant's E-mail: _____

Offence Number: _____

Offence Description: _____

Offence Act and Section: _____

Amount of Fine: _____

Time given to pay Fine: _____

Amount Paid: _____

I have been unable to pay the fine within the time given for the following reasons:

I am applying for an extension of time for payment until (dd/mm/yy): _____

I have previously obtained: _____ extension(s).

My last extension expired on (dd/mm/yy): _____

Dated at: _____

Dated on (dd/mm/yy): _____

Defendant's Signature: _____