

Stanislaus County Superior Court Payment Plan Information

Set up a Payment Plan Program:

Case # _____
(will be needed to make payments)

The payment Plan is a program which allows you to make monthly payments on your citation (ticket).

If you would like to set up a payment plan today, bring the following to the counter/window:

- Complete and sign the attached enrollment form
- Have your photo ID ready

Once you are on a Payment Plan:

- You cannot go back to court.
- It is your responsibility to make payments as agreed.
- **If payments are not made by the agreed date, there will be further penalties added in the amount of \$100 per case.**
- It is your responsibility to notify the court if you have a change of address, financial status, or cannot make your payment by the agreed upon date.
- **Your case number will be required to properly credit your payment to your case.**

THERE ARE FOUR WAYS TO PAY:

By Mail or In Person at:

Traffic Division (include your case #)
2260 Floyd Avenue
Modesto, CA 95355

Drop Box:

Traffic Division – same location (include your case #)
(Drop box is located on the outside of building.
Payments received after 4 pm will not be processed
until the next business day.)

On line (small convenience fee):

<https://stanportal.stanct.org>

Make checks payable to Superior Court.

Pursuant to California Rule of Court 4.105(b), **you have the option to appear for arraignment and trial without posting bail.** Under rule of Court 4.105(c), **bail is required** to be deposited if you elect to proceed with trial by written declaration without appearing in court (VC 40902) and/or written not guilty plea (VC 40519(a-b)), or elect to pay bail and not contest the citation or appear in court (VC 40510 and 40521).

SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS
PAYMENT PLAN ENROLLMENT FORM

DATE: _____ **CASE NUMBER:** _____
Last Name: _____ First Name: _____ M. I.: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone #: _____ Date of Birth: _____
Social Security #: _____ Drivers License #: _____
Relative/Friends Name and Phone #: _____

IT IS YOUR RESPONSIBILITY TO MAKE PAYMENTS AS AGREED. PAYMENTS MUST BE PAID EVERY MONTH FOR NO LESS THAN THE AGREED UPON MINIMUM MONTHLY PAYMENT. IF PAYMENTS ARE NOT MADE BY THE AGREED UPON DATE, A CIVIL ASSESSMENT MAY BE ADDED PURSUANT TO PC 1214.1 IN THE AMOUNT OF \$100.00 OR MORE PER CASE AND YOUR LICENSE MAY BE SUSPENDED. SUSPENSION MAY NOT BE LIFTED UNTIL THE TOTAL AMOUNT OWED IS PAID IN FULL.*

***PLEASE NOTE: IF YOUR LICENSE HAS BEEN SUSPENDED IT MAY TAKE 3 TO 5 BUSINESS DAYS FOR YOUR LICENSE TO BE RELEASED.**

WARNING: Should you default on your payment plan your case will be forwarded to the Franchise Tax Board or another outside agency for collections.

Initial here that you understand this statement: _____ Verified ID _____

NOTE: Monthly payment amounts will be calculated based upon the full amount of your fines and fees (minus your initial payment) divided by 12 months (the term of the contract) but shall be NO LESS THAN \$20.00 per month. If you decide to make a payment for more than your minimum monthly payment amount, you are still required to make your next month's payment (unless it is your final payment).

The above information is true and correct to the best of my knowledge.

Signature: _____ *Date:* _____

Once your form has been processed please see the attached payment schedule.

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Checks should be made payable to: Superior Court. Please note that if your case is in failure to pay status, we can no longer accept a personal check. Please remember to always include your name and case number with your payment.