

IN THE GENERAL SESSIONS COURT FOR DAVIDSON COUNTY, TENNESSEE

_____,)
Plaintiff(s))
_____,)
Attorney for Plaintiff(s))
vs.)
_____,)
Defendant(s))
_____,)
Attorney for Defendant(s))

CASE NO: _____

Court Date: _____

Reset Date: _____

Review Date: _____

Courtroom: _____ @ _____ a.m.

Justice A.A. Birch Building, 408 2nd Ave. N
P. O. Box 196304, Nashville, TN 37219-6304
Phone: 615-862-5195

MOTION AND AFFIDAVIT
FOR INSTALLMENT PAYMENTS

Comes the Defendant, pursuant to *Tennessee Code Annotated §26-2-216*, and would move this Honorable Court to reduce the judgment heretofore entered in this case to installment payments in the amount of \$_____ per _____. In support of this *Motion*, the Defendant would offer the *Affidavit of Income and Property* attached hereto.

Defendant would further allege that the payment schedule is the maximum payment Defendant can reasonably make on said judgment. Defendant would allege there are no other sources of income other than the wages from the employer set forth in said *Affidavit*.

Defendant Signature

Sworn to & subscribed before me, this
_____ day of _____, 20____.

Deputy Clerk/Notary Public (Signature)

AFFIDAVIT OF INCOME AND PROPERTY

Case Number _____

_____ vs. _____

Comes now the Defendant and, subject to the penalty of perjury, makes oath and says that the following facts are true and that there is NO OTHER source of income or property other than that described below:

1. Full Name: _____
Address: _____

Phone #: _____
Last four digits of Soc. Sec. #: _____
Employer: _____
Phone #: _____

2. List all dependents:

Name	Age	Relationship
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3. List all income from any source:

\$ _____ per wk ☐ mo ☐
from _____

\$ _____ per wk ☐ mo ☐
from _____

\$ _____ per wk ☐ mo ☐
from _____

I receive CHILD SUPPORT in the sum of
\$ _____ per _____

4. List all bank accounts:

ACCOUNT	BANK/SOURCE	BALANCE
Checking:	_____	\$ _____
Savings:	_____	\$ _____
Other:	_____	\$ _____
Other:	_____	\$ _____

5. List all debts:

CREDITOR/ADDRESS	BALANCE
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

6. List all monthly household expenses:

Rent/Mortgage: _____
Utilities: _____
Health Insurance: _____
Transportation Cost: _____
Food: _____
Clothing: _____
Other: _____

TOTAL _____

7. List all land/house/real estate/property you own:

DESCRIBE:	VALUE
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

8. List all personal property, cars, trucks, furniture, stocks, bonds, tools, and equipment you own and its total value:

DESCRIBE:	VALUE
Cars _____	\$ _____
Trucks _____	\$ _____
Other _____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

9. List all assets/property sold or transferred in the last six months:

DESCRIBE:	VALUE
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

VERIFICATION AND OATH: Comes now the Defendant and makes oath, subject to the penalty of perjury, that the information in this Motion for Installment Payments is true to the best of Defendant's knowledge, information and belief.

Defendant Signature

* You are required to bring check stubs, payment stubs, and receipts for any income or expense claimed on this Affidavit.



To request an ADA accommodation, please contact Dart Gore at (615) 880-3309.