

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 TO
REINSTATE/MODIFY INSTALLMENT PAYMENTS**

Comes the Defendant, pursuant to *Tennessee Code Annotated §26-2-217*, and would move this Honorable Court to REINSTATE; or, MODIFY the previous *Installment Payment Order* of _____, for the following reason: _____

Defendant would further move this Honorable Court to be allowed to make 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 and 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 |
|-------|-------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

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 |
|-----------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

Defendant Signature

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.

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