

# Payment Plan Guidelines & Application (for parking citations only)



## GUIDELINES

Registered owners who cannot afford to pay for their citation have the option to enroll in one of two payment plans listed below. Both installment plans will not cancel the fine. It will simply allow some flexibility to the motorists and allows the total amount due to be paid in installments over time.

### **(1) INDIGENT PAYMENT PLAN :**

California Vehicle Code (CVC) Section 40220 establishes that an issuing agency shall provide a payment plan option for indigent persons. The City will consider individuals who can provide documentation that eligibility guidelines are met. If approved and enrolled in an Indigent Payment Plan for Parking Citations, late fees and penalty assessments will be waived. The following terms apply to all indigent payment plans:

- Indigent status must be determined pursuant to criteria listed in this application. Documents needed to make an indigent determination must be supplied at the time of application within the statutorily prescribed time frame.
- The individual applying for an indigent plan must be the registered owner or lessee of the vehicle.
- Indigent payment plans can only be approved for citations issued on or after July 1, 2018.
- The individual must apply for an indigent payment plan within 120 calendar days from the notice of parking violation or 10 days after the hearing determination, whichever is later.
- An indigent person who falls out of compliance with the payment plan is allowed a one-time extension of 45 calendar days from the date the payment plan becomes delinquent to resume payments before the processing agency files an itemization of unpaid parking penalties and related service fees with the Department of Motor Vehicles pursuant to California Vehicle Code Section 40220.
- A one-time \$5 fee will be applied.
- An additional one-time \$5 fee will also be applied if the City has to rescind the filing of an itemization of unpaid parking penalties with the Department of Motor Vehicles.
- The City will allow only one (1) active payment plan.
- More than one citation can be added to a payment plan but the total amount of the payment plan may not exceed \$500.
- Individuals will have up to twenty-four (24) months to pay off the payment plan balance.
- Only one notification letter will be sent with the installation schedule. It is the responsibility of the registered owner to make a monthly payment (of no more than \$25) pursuant to the installation schedule.
- An internet service fee of \$3.95 will be added to each monthly transaction if paid online.
- If a person chooses to make a payment of more than \$25, they must make it in person or by mail as the online system will not accept a payment of more than \$25 per month.

**(2) STANDARD PAYMENT PLAN:**

Registered owners who do not qualify as “indigent” but who cannot afford to pay for their citation have the option to enroll in a standard payment plan. The following terms apply to all standard payment plans:

- No proof of income is required.
- A one-time \$25 fee will be applied.
- An internet service fee of \$3.95 will be added to each monthly transaction if paid online.
- The parking citation must be in good standing, meaning that the parking citation must not have late fees and/or be in the “delinquent” stage of the ticket.
- The total amount due on the parking citation shall be no less than \$250.00.
- The payments shall be divided into no more than four equal payments, payable on the first of each month (a five day grace period shall be added to all payments made via U.S. Mail).
- The total amount due shall be paid within 120 days.
- Individuals who fail to make scheduled payments shall be deemed in default of their standard payment plan. In the event of default, the entire remaining balance owing on the citation shall become due and payable immediately.
- The City shall not be required to give written notice to individuals who default on their payment plan.
- In the event that the defaulting party remains in default for over 10 days, the citation shall be referred to collections.

The Application can be found on Page 3.

Please mail completed application and supporting documentation to:

Community Improvement Services Department  
Attention: Parking Department  
205 S. Willowbrook Avenue, Compton, CA 90220

# Payment Plan Application (for parking citations only)



- ☐ Standard Payment Plan - If this box is checked, disregard the section on eligibility criteria and complete the section titled "Application"
- ☐ Indigent Payment Plan - Please complete the eligibility criteria (#1 or #2) you are using to determine indigent status. Indigent determination can not be made without supporting documentation.

## **ELIGIBILITY CRITERIA #1: INCOME (INDIGENT PLANS ONLY)**

Effective July 1, 2018, the City of Compton will adhere to the guidelines in the Federal Register by the United States Department of Health and Human Services under the authority of paragraph (2) of Section 9902 of Title 42 of the United States Code. Qualified individuals must fall within the monthly income of 125% or less of the current poverty guidelines, as listed on Page 4 of this application. Please provide proof of income from a paystub or another form of proof of earnings (most recent W-2; bank statement) in order to verify that you meet the income criteria listed on Page 4 of this application. In addition, please list the number of persons in your household: \_\_\_\_\_

## **ELIGIBILITY CRITERIA #2: CURRENT PROOF OF PUBLIC BENEFITS (INDIGENT PLANS ONLY)**

Please provide a copy of an electronic benefits card or another card (dated within the last year), subject to review and approval by the City of Compton, of proof of applicant receiving one of the following benefits. Indigent determination cannot be made without supporting documentation.

<input type="checkbox"/> Supplemental Security Income (SSI) and State Supplementary Payment (SSP)	<input type="checkbox"/> California Work Opportunity and Responsibility to Kids Act (CalWORKs) or a federal Tribal Temporary Assistance for Needy Families (Tribal TANF) grant program
<input type="checkbox"/> Supplemental Nutrition Assistance Program or the California Food Assistance Program	<input type="checkbox"/> County Relief, General Relief (GR), or General Assistance (GA)
<input type="checkbox"/> Cash Assistance Program for Aged, Blind, and Disabled Legal Immigrants (CAPI)	<input type="checkbox"/> In-Home Supportive Services (IHSS) <input type="checkbox"/> Medi-Cal

## **APPLICATION**

Please complete the information below and attach supporting documentation. Any missing information or documentation may result in the denial of your request. Please mail completed application and supporting documentation to: City of Compton, Community Improvement Services Dept, Attn: Parking Department, 205 S. Willowbrook Ave. Compton, CA 90220

<b>First Name</b>		<b>Last Name</b>	
<b>Address</b>			
<b>Phone #</b>			
<b>Citation No.</b>		<b>License Plate No.</b>	

**PLEASE READ AND SIGN:** I declare under penalty of making a false declaration that I am authorized to make this statement, and to the best of my knowledge it is a true, correct, and complete statement made in good faith.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Poverty Guidelines, all states (except Alaska and Hawaii)**  
**2020 Annual Guidelines**

Household /Family Size	50%	*100%*	125%	130%	133%	135%
<b>1</b>	\$6,380	\$12,760	\$15,950	\$16,588	\$16,971	\$17,226
<b>2</b>	\$8,620	\$17,240	\$21,550	\$22,412	\$22,929	\$23,274
<b>3</b>	\$10,860	\$21,720	\$27,150	\$28,236	\$28,888	\$29,322
<b>4</b>	\$13,100	\$26,200	\$32,750	\$34,060	\$34,846	\$35,370
<b>5</b>	\$15,340	\$30,680	\$38,350	\$39,884	\$40,804	\$41,418
<b>6</b>	\$17,580	\$35,160	\$43,950	\$45,708	\$46,763	\$47,466
<b>7</b>	\$19,820	\$39,640	\$49,550	\$51,532	\$52,721	\$53,514
<b>8</b>	\$22,060	\$44,120	\$55,150	\$57,356	\$58,680	\$59,562
<b>9</b>	\$24,300	\$48,600	\$60,750	\$63,180	\$64,638	\$65,610
<b>10</b>	\$26,540	\$53,080	\$66,350	\$69,004	\$70,596	\$71,658

**Poverty Guidelines, all states (except Alaska and Hawaii)**  
**2020 Monthly Guidelines**

Household /Family Size	50%	*100%*	125%	130%	133%	135%
<b>1</b>	\$532	\$1,063	\$1,329	\$1,382	\$1,414	\$1,436
<b>2</b>	\$718	\$1,437	\$1,796	\$1,868	\$1,911	\$1,940
<b>3</b>	\$905	\$1,810	\$2,263	\$2,353	\$2,407	\$2,444
<b>4</b>	\$1,092	\$2,183	\$2,729	\$2,838	\$2,904	\$2,948
<b>5</b>	\$1,278	\$2,557	\$3,196	\$3,324	\$3,400	\$3,452
<b>6</b>	\$1,465	\$2,930	\$3,663	\$3,809	\$3,897	\$3,956
<b>7</b>	\$1,652	\$3,303	\$4,129	\$4,294	\$4,393	\$4,460
<b>8</b>	\$1,838	\$3,677	\$4,596	\$4,780	\$4,890	\$4,964
<b>9</b>	\$2,025	\$4,050	\$5,063	\$5,265	\$5,387	\$5,468
<b>10</b>	\$2,212	\$4,423	\$5,529	\$5,750	\$5,883	\$5,972