



CSU East Bay

Application Parking Citation Payment Plan Information

CSU East Bay offers individual(s) with **multiple** unpaid parking citations or citations totaling \$200.00 or more to enroll in a payment plan pursuant to ICSUAM Policy 4071.00.

Payment Plan Details:

- Applied late fees will not be removed but any late fees not yet applied will be placed on hold while the payment plan is in place.
- Any citations with DMV registration holds will be temporarily removed during the duration of this payment plan. If the **individual** defaults on the payment plan (e.g. misses a scheduled payment), the remaining balance AND all fees placed on hold will be reinstated. In addition, the DMV registration hold will be placed back on the vehicle's registration.
- If your payment plan is approved, a PMB customer service representative will contact you via e-mail in regards to your payment plan timeline and due date(s). A copy of the timeline and due date(s) will also be mailed to the address of the individual listed on the Payment Plan Application.
- Any parking ticket(s) on a payment plan cannot be disputed.

Payment Plan Duration:

Payment Plan Balances under \$200	Payment Plan Balances between \$200 - \$400	Payment Plan Balances over \$400
Payment plan must be completed	Payment plan must be completed	Payment plan must be completed
within 4 (four) months	within 6 (six) months	within 9 (nine) months

To enroll in a Parking Citation Payment Plan, you must submit:

- 1) A COMPLETED Parking Citation Payment Plan application (next page)
- 2) Submit a non-refundable payment plan enrollment fee of \$25.00 plus 10% of the payment plan total by check or money order





CSU East BayApplication Parking Citation Payment Plan

Name:		
Address:		
City, State, Zip Code:		
Telephone #:		
E-mail address:		
License Plate #:		
TICKET(S) #	AMOUNT OF FINE	
A Ticket(s) Subtotal	\$	
B Payment Plan Fee (PPF)	\$25.00	
Total Amount to be Included in Payment Plan (includes PPF)	\$	
D less 10% of Ticket(s) Subtotal + \$25.00 PPF* *due with Payment Plan application	\$	
E Balance Payment Plan Total (to be included in payment plan) C - D	\$	
By signing this form, I,, ag	, I,, agree to the terms and conditions (print name)	
(print name) of the payment plan as outlined in the payment plan i		
Signature Date	re Date	

You must mail this completed **application**, \$25.00 enrollment fee and 10% of the payment plan (by check or money order only) total to:

Parking Management Bureau C/O Payment Plans One University Circle Turlock, CA 95382