

## **HOT CHECK DIVISION**

The Caldwell County Criminal District Attorney's Hot Check Division is a place for merchants and citizen to report those who write worthless checks. This division is one of the few divisions at the District Attorney's office that is able to take reports of criminal conduct directly from the victim of the crime. Our first priority is to collect restitution for the merchants and citizens that file checks with our office. We can also use the criminal court system to see that restitution is paid on the checks and check writers are identified and punished.

Important information for Merchants:

1. We accept checks passed in Caldwell County
2. Statute of limitations on checks is 2 years
3. We collect \$30.00 merchant fee on each check
4. Without a driver's license number, a warrant cannot be issued

We hope this web site proves to be helpful to you. If you have further questions or have comments, please call 512-398-1811 extension 4330. Hot check coordinator is Janice Benbow.

PDF document for download

Hot Check Data Form

**HOT-CHECK DATA FORM**  
**CRIMINAL DISTRICT ATTORNEY, CALDWELL COUNTY, TEXAS**  
 1703 S. COLORADO ST. BOX 5, LOCKHART, TEXAS 78644  
 (512) 398-1811

Date \_\_\_\_\_

NAME OF PERSON SIGNING CHECK(S) \_\_\_\_\_ TDL \_\_\_\_\_  
 Home Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Other ID \_\_\_\_\_  
 Work or \_\_\_\_\_ SS# \_\_\_\_\_  
 Business \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Is this a company check? \_\_\_\_\_ Check writer's relationship to company \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_  
 Hair \_\_\_\_\_ Eyes \_\_\_\_\_

How many checks are being filed? \_\_\_\_\_ Payable to \_\_\_\_\_

- |                  |            |          |  |
|------------------|------------|----------|--|
| 1. CHECK # _____ | DATE _____ | \$ _____ | *(Maximum five checks per form, if all checks accepted by same<br>PERSON ACCEPTING CHECK(S): |
| 2. CHECK # _____ | DATE _____ | \$ _____ |  |
| 3. CHECK # _____ | DATE _____ | \$ _____ |  |
| 4. CHECK # _____ | DATE _____ | \$ _____ |  |
| 5. CHECK # _____ | DATE _____ | \$ _____ |  |

Was check thought to be good when taken? \_\_\_\_\_ Was information on front of check verified? \_\_\_\_\_ Was check post dated? \_\_\_\_\_ Deposited within 30 days?  
 Bank returned check stamped: NSF \_\_\_\_\_ ACCOUNT CLOSED \_\_\_\_\_ OTHER \_\_\_\_\_

**DESCRIBE PROPERTY OR SERVICE FOR CHECK(S) (ATTACH A LEGIBLE INVOICE IF AVAILABLE):**

Was all or part of property returned? \_\_\_\_\_  
 Was property delivered or service rendered in Caldwell County? \_\_\_\_\_ If no, where? \_\_\_\_\_  
 Was property delivered or service rendered at the time check was received? \_\_\_\_\_ If no, when? \_\_\_\_\_  
 Has the check writer made any partial payments? \_\_\_\_\_ If so, when? \_\_\_\_\_ How applied? \_\_\_\_\_  
 Has the check writer made a promissory note? \_\_\_\_\_ If so, what amount? \_\_\_\_\_ Date \_\_\_\_\_ Explain \_\_\_\_\_

**PERSON ACCEPTING CHECK(S):**

Can he/she identify check writer? \_\_\_\_\_ If no, who can? \_\_\_\_\_  
 Did signer of check deliver check in person? \_\_\_\_\_ If no, who? \_\_\_\_\_  
 Did someone else see check delivered? \_\_\_\_\_ (List names of witnesses on back)  
 Can the witness(es) identify signer of check(s) \_\_\_\_\_ Or person delivering check(s)? \_\_\_\_\_

**ATTEMPTS MADE BY YOU TO NOTIFY CHECK WRITER:**

Phone Call? \_\_\_\_\_ Certified Letter? \_\_\_\_\_ Was the certified letter mailed to the address printed on the check? \_\_\_\_\_ If not, to what address  
 was the certified letter mailed and why? \_\_\_\_\_  
 Date letter was mailed? \_\_\_\_\_ Was return receipt signed? \_\_\_\_\_ Who signed? \_\_\_\_\_ Date \_\_\_\_\_  
 Was letter returned? \_\_\_\_\_ How was it marked? \_\_\_\_\_ Date \_\_\_\_\_  
 Where can person who signed check be located today? \_\_\_\_\_

**STATUTORY PROCESSING FEE:**

Art. 102.007 TEX. CODE CRIM. PRO. ANN.; Sec. 3.506 TEX. BUS. & COMM. CODE ANN.

I request that Criminal District Attorney collect the statutory processing fee regarding each of the checks listed herein. Yes  No   
 Amount per check \$30.00 (Fee not to exceed \$30.00 per check)

**RESTITUTION:**

Money collected should be sent to \_\_\_\_\_ Address \_\_\_\_\_  
 \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Should we require more information, contact \_\_\_\_\_  
 \_\_\_\_\_ Phone \_\_\_\_\_

I understand that my check(s) may be accepted for collection purposes only. Criminal District Attorney cannot assure restitution, nor can the Criminal District Attorney guarantee that this complaint will be accepted for prosecution. If a decision is made to prosecute the checkwriter, this check will become part of the evidence file for the State of Texas. I hereby swear that the above information is true, correct and complete to the best of my knowledge. I understand that if charges are filed, a warrant can be issued to have the checkwriter placed in jail. If necessary, the above named witness(es) may be required to appear and testify against the checkwriter in court. I am familiar with the provisions of Section 3.506 of the Texas Business and Commerce Code and will not violate the law regarding a double recovery of the statutory processing fee.

\_\_\_\_\_  
 COMPLAINANT \ AGENT for \_\_\_\_\_