

REQUEST TO DEFER TRAFFIC INFRACTION

Name: _____

Citation # _____

Address: _____

Phone Number: _____

I request that the court defer findings on the above traffic infraction for a period of at least (6) six months. I understand that the Judge will make the final decision on what that time will be. I agree to pay the maximum penalty amount for this infraction \$_____, together with a \$25.00 administration fee for a total of \$_____. My payment is enclosed. I understand that from the date that the court grants me a deferred finding until the date my deferral ends, that I must remain infraction free.

_____ I certify that I have not deferred any other non moving traffic infraction cases within the past 7 years.

_____ I certify that I have not deferred any other moving traffic infraction cases within the past 7 years.

Dated ____/____/____ _____
Defendant

For court action only

APPROVED: ____/____/____ _____
Judge