

REQUEST/AFFIDAVIT FOR DRIVER SAFETY COURSE

I hereby enter my plea of (check one) _____ GUILTY _____ NO CONTEST
to the offense, and request permission to take a Driver Safety Course.

1. I have not taken a Driver Safety Course within the last 12-month period. It must have been a complete 12 months.
2. I am not in the process of taking a Drivers Safety Course for another ticket in another Court
YOU MUST PROVIDE THE COURT WITH:

1. A copy of your ticket
2. A copy of your liability insurance
3. Payment of \$144.00 (Non-refundable) court costs and administrative fee to
JUSTICE OF THE PEACE PCT ONE
MONEY ORDER or CASHIER'S CHECK only.

DISQUALIFICATIONS

1. Cannot be going 95 mph or more; or 25mph or more over the posted speed limit
2. If you hold a Commercial Driver's license (Regardless if the violation occurred in your private vehicle)
3. If you are ticketed for passing a school bus.
4. If you are ticketed for speeding in a construction zone with workers present.

I understand that I have 90 days (no exceptions) from the date of request to complete the Driver Safety Course and send the ORIGINAL Completion Certificate and a copy of my driving record form 3a version to the Court. Upon receipt, and if all fees have been paid, the traffic citation will be dismissed. If I fail to present the ORIGINAL CERTIFICATE (signed) AND MY DRIVING RECORD by the 90th day I understand that a final conviction will be entered in my case and the balance will be owed.

I understand if I fail to comply or fail to appear at any court dates, the case will proceed to a final conviction and a warrant will be issued for my arrest.

Date: _____ Signature: _____

Printed Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Citation#: _____