

**CITY OF MURFREESBORO, TENNESSEE**  
**AFFIDAVIT FOR PHOTO ENFORCEMENT VIOLATION NOTICE**



Please mail the Affidavit and supporting documentation to:  
**City of Murfreesboro / Automated Traffic Enforcement Program**  
 PO Box 593095  
 Orlando, FL 32809-3095

STATE OF: \_\_\_\_\_ SS \_\_\_\_\_  
(State you are in now) (City you are in now)  
 COUNTY OF: \_\_\_\_\_  
(County you are in now)

**AFFIDAVIT OF DEFENSES**

Name: \_\_\_\_\_ Telephone No: ( ) - \_\_\_\_\_  
(Print Name as it appears on your Notice) (Include Area Code)  
 Address: \_\_\_\_\_ License Plate No: \_\_\_\_\_  
(Street, and Appt. or Unit No.) (License Plate Number and State)  
 \_\_\_\_\_ Violation No: \_\_\_\_\_  
(Address 2) (Appears at the bottom left hand corner of your Notice)  
 \_\_\_\_\_ Violation Date: \_\_\_\_\_  
(City, State and Zip Code) (Appears on the face of the Notice below first)

***(Affidavit must be notarized)***

I, \_\_\_\_\_ (print or type name), being first duly sworn, hereby swear or affirm under penalty of perjury (Tennessee Code Section 39-16-702):

*(Check as applicable)*

- The vehicle was not in my care custody and or control at the time of the incident. You must complete the affidavit below, providing complete, current, and accurate information for the person who was in custody of and operating the referenced vehicle at the time the incident occurred.  
**This Affidavit must be signed and notarized or you will remain responsible for the violation.**
- If you vehicle and/or its tags were stolen at the time of the incident, you must enclose a certified copy of the Police report and the registered of the vehicle referenced herein must sign this affidavit declaring that such vehicle and/or its tags were stolen at the time of the incident.
- If your vehicle was a commercial vehicle with a registered gross weight of 10,000 pounds or more, a tractor vehicle, a trailer operated in combination with a tractor vehicle, or a passenger bus, and you were not operating the vehicle at the time of the incident, you must complete the affidavit below listing the name, address, and driver's license number and state of the person operating the vehicle at the time of the violation.

Further Affiant sayeth not.

\_\_\_\_\_  
(Signature of Affiant)  
 \_\_\_\_\_  
(Print Name)  
 \_\_\_\_\_  
(Date)

Subscribed and Sworn before me this \_\_\_\_ day of \_\_\_\_\_,

Signature of Notary Public

Notary Stamp

The vehicle identified in the Subject Notice of Violation was, at the time of the alleged violation, under the care custody and control of the following named individual:

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
(Street, and Appt. or Unit No.)  
 \_\_\_\_\_  
(Address 2)  
 \_\_\_\_\_  
(City, State, Zip.)

Drivers License No.: \_\_\_\_\_  
(State) (DL Number)

Telephone No.: ( ) - \_\_\_\_\_

*\* If all information is not provided, this Affidavit will be rejected*  
*\*\* If this section is completed, the named individual will receive a Notice of Violation.*