

DRIVING SAFETY REQUEST FORM

CITATION # _____

STATE OF TEXAS
VS

IN THE MUNICIPAL COURT
CITY OF ALVIN
BRAZORIA COUNTY, TEXAS

(Defendant's Name)

TO REQUEST DRIVING SAFETY

You Must Receive Permission From Court First Before Taking The Course. Under The Laws Of The State Of Texas, You May Be Able To Require That This Charge Be Dismissed By Taking A Driving Safety Course. However, You Cannot Have A Charge Dismissed By Taking A Driving Safety Course If You Are Charged With A Speeding Violation Of 25 Mph Or More Above The Posted Speed Limit, For An Offense That Occurred In A Construction Zone When Workers Were Present, Or If You Have A Commercial Driver's License.

I Hereby Plead No Contest To The Attached Moving Traffic Violation And Request That The Court Defer Proceedings In My Case For 90 Days So That I May Complete An Approved Driving Safety Course, Present A Certificate Of Completion, A Driving Record, And Have The Court Dismiss My Case. I Understand That Failure To Complete The Class Within The 90 Period Will Result In A \$200 Fine.

1. I Have A Valid Texas Driver's License That Is Not A Commercial License or I am a spouse or dependant of a member or I am a member of the United States military forces serving on active duty.
2. I Have Not Completed A Driving Safety Course or Motorcycle operator training course Within 12 Months Of The Date I Received This Citation.
3. I Am Not Currently Taking A Driving Safety Course or Motorcycle operator training course; nor, Have I Completed One That Is Not Yet Reflected On My Driving Record.
4. I Enclosed Proof Of Financial Responsibility **For The Date On Which I Received My Citation.**
5. I Further Understand That This Form Must Be Signed, Notarized, And Submitted With The Administrative Fee (\$114.10 Moving Violation Or \$139.10 Moving Violation In A School Zone) By The Appearance Date On My Citation.

DL #

SIGNATURE

PHONE #

ADDRESS

Under Pain Or Penalty Of Perjury, Sworn To And Subscribed Before Me This _____ Day Of _____, _____.

NOTARY PUBLIC, STATE OF TEXAS
COMMISSION EXPIRES: _____

Payment Must Be Made By Money Order Or Cashiers Check To The Alvin Municipal Court
(No Personal Checks)

MAIL THIS FORM WITH A COPY OF YOUR CITATION, VALID TEXAS DRIVER'S LICENSE, INSURANCE COVERAGE FOR THE DATE OF THE CITATION, AND PAYMENT TO:

CITY OF ALVIN MUNICIPAL COURT
216 WEST SEALY ST
ALVIN, TX 77511

(Keep a Copy of this form for your records)