

REQUEST TO TAKE A DRIVER SAFETY COURSE AND AFFIDAVIT
TOWN OF FAIRVIEW MUNICIPAL COURT
372 TOWN PLACE . FAIRVIEW, TX 75069

CITATION # _____

OFFENSE DESCRIPTION _____

I, (print name) _____, Defendant , request to take a DRIVER SAFETY COURSE OR MOTORCYCLE TRAINING COURSE as applicable, under Art. 45.0511, Code of Criminal Procedure, to have the above referenced citation dismiss upon successful completion of said course. I understand that I have a right to a jury trial and state the following under oath:

- 1) I hereby enter my plea of: (CIRCLE ONE) **NO CONTEST** **GUILTY**
- 2) I understand that this request must be notarized (or I will have to make the request in person at the court office)
- 3) I must include a copy of my valid Texas Driver's License or Permit. I have a valid Texas License
- 4) I must include a copy of valid Texas Insurance listing me as an insured driver
- 5) I must include the court costs with this request (\$144.00 non school zone / \$169.00 in school zone) the amount for this request is \$_____ (money order, **your** personal check, cashier check)
- 6) I have not completed a driver safety course within the past 12 months prior to the date of the citation referenced above and am not currently take a course for another violation
- 7) I was not cited for speeding 25 mph or more over the posted speed limit and not in a construction zone
- 8) I was not cited for driving 95 mph or more
- 9) I was not involved in an accident at the time of the violation
- 10) I was not driving in a construction zone with workers present at the time of the violation
- 11) I do not hold a commercial driver's license
- 12) I was not under the age of 17 at the time of the violation
- 13) I waive my right to a jury trial
- 14) I must wait until I am notified by the Court as to whether my request has been granted or denied. If granted or denied, I understand that I will receive further detailed instructions by mail from the Court
- 15) If granted, I will be required to pay for the course and the certified copy of my driving record separate from the fee I have already submitted with this request
- 16) I may contact the court at 972-886-4240 to ask questions or to make inquiry about the status of my citation and request during business hours M-F 8:00 AM to 4:30 PM
- 17) I have read and understand this request. The request and the affidavit must be notarized, all required documents and payment must be received by the Court together on or before the answer/appearance deadline as indicated on the citation in order to be considered timely.
- 18) Mail to: Town of Fairview Municipal Court – 372 Town Place, Fairview, TX 75069

Defendant Signature

Date of Birth

Defendant Current Address/City/State/Zip

Phone

Email

Sworn and Subscribed before me, the undersigned authority on the _____ day of _____, 20____.

Notary Public

Seal

TOWN OF FAIRVIEW MUNICIPAL COURT
372 TOWN PLACE . FAIRVIEW, TX 75069

DRIVER SAFETY COURSE AFFIDAVIT

CITATION # _____

OFFENSE DESCRIPTION _____

STATE OF TEXAS

VS

IN THE MUNICIPAL COURT

TOWN OF FAIRVIEW

COLLIN COUNTY, TEXAS

DEFENDANT NAME (PLEASE PRINT)

(THIS FORM MUST BE NOTARIZED AND RETURNED TO THE COURT ALONG WITH YOUR REQUEST TO TAKE A DRIVER SAFETY COURSE)

I, , state under oath that I am not in the process of taking a driving safety course or motorcycle operator training course, as applicable under Art. 45.0511, Code of Criminal Procedure, on the date the request to take the course was made and had not completed such a course that is not shown on my driver's record as maintained by the Texas Department of Public Safety within the 12 months preceding the date of the offense, or if active military I have not taken a driver safety course within the 12 months preceding the date of the offense in any state

DEFENDANT SIGNATURE

DATE

ADDRESS

CITY/STATE/ZIP

PHONE # _____

Email _____

Sworn and Subscribed before me, the undersigned authority on the _____ day of _____, _____.

Notary

(seal)