

REQUEST FOR DEFERRED DISPOSITION

My name is _____ and
I received a citation for the offense of _____.
My citation number is _____.

I understand that I may have this charge dismissed by Deferred Disposition. I understand that being granted a Deferred Disposition is a privilege, not a right, offered solely at the discretion of the Court. I also understand that I must meet all eligibility requirements to receive the Court's consideration.

I swear that the following statements are true:

- I waive my right to trial and hereby enter a plea of NO CONTEST.
- I am charged with an offense eligible for Deferred Disposition and have verified this fact with the Court.
- I am not a Commercial Driver License holder charged with a Rules of the Road offense.
- I am not currently on probation for the dismissal of a traffic citation in another Court nor have I participated in a Deferred Disposition in the six months preceding the issue date of my citation.

I understand that if I am approved for a Deferred Disposition, I will be placed on probation for a period not to exceed 180 days, and I will receive a copy of my Deferred Disposition Order at the mailing address below.

I understand that if I violate any term of my probation this charge will not be dismissed, and a conviction will be reported to the Texas Department of Public Safety.

I further understand that, if I am under 25 years of age, I must complete a Driver's Safety Course and show proof of completion to the Court within 90 days of my approved request.

The forgoing representations are true and correct in all respects, and by signing below I acknowledge the accuracy of the above statements.

Defendant's Signature

Date

Mailing address (required):

Phone: _____

Email: _____