

JUSTICE OF THE PEACE COURT
PRECINCT 3 ROCKWALL COUNTY, TEXAS- *JP3@rockwallcountytexas.com*
APPLICATION FOR DEFERRED DISPOSITION
(If approved an additional fee may be added to fine.)

Defendant's Name

Citation Number

Please answer *yes or no* to the following questions:

YES *NO*

- [] [] 1. Are you on deferred disposition (probation) for any other citation?
[] [] 2. Have you received another citation for this charge within past twelve (12) months?
[] [] 3. Have you completed an approved Driver's Safety Course in the past twelve (12) months?
[] [] 4. Was there an accident involved at the time you received your citation?
[] [] 5. Were you cited for driving 25 mph or more over the posted speed limit?

Note: Persons holding a valid CDL- Commercial Driver's License are ineligible for the deferred.

AFFIDAVIT

I have a valid Driver's License or Permit (from the state of residence).
I have proof of insurance, and I am listed as a driver on the insurance policy or insurance card.

PLEA (You must enter a Plea before the Judge will consider your Deferral request)

I hereby enter my plea of (Initial one) _____ NO CONTEST **OR** _____ GUILTY

to the offense of: _____ and ask the court to grant me Deferred Disposition.
I understand that as a condition of my deferment, I cannot commit an offense against the State of Texas while under this court order.
Furthermore, I understand that if I am under the age of 25, by law I will be required to take a driver's safety course to receive deferred disposition. I also understand that if my request is denied, a Judgment of *Convicted* will be entered, which may result in the conviction being reported on my driving record.

Check one:

- _____ I plan to pay any fees in full.
_____ I am not indigent, but I request that I be allowed to pay out by installments, the fee(s) and cost pursuant to the terms and conditions set by this Court.
_____ I am indigent and request an Indigency Hearing. I request that I be allowed an alternative sentence as prescribed by the Court.

Defendant's Signature

Date

Defendant's Address

DL#

Defendant's City, State, Zip

Date of Birth

Defendant's Phone Number

FOR OFFICE USE ONLY

\$ _____ Court Cost

_____ Mandatory Driver Safety Course

\$ _____ Fine

_____ Approved _____ Denied

\$ _____ Deferred Fee

Comments: _____

\$ _____ Total Due

Judge Mark Russo

Date