



**COURTESY SHEET 2010**

PROVIDED TO YOU BY

**HON. RONNIE L. DANIELL**

**VAN ZANDT COUNTY JUSTICE COURT PRECINCT #2**

**P. O. BOX 9 CANTON, TX 75103**

***Please Read Carefully and Follow All Directions***

**The law requires you to appear in the court indicated on your citation.**

**You may appear in person, or by mail, and enter your plea.**

**Juveniles (age 16 and younger) are REQUIRED to appear before the Judge in Open Court, accompanied by a parent or guardian**

*(Please contact the court to schedule the juvenile appearance).*

**DRIVING SAFETY COURSE**

*(CDL EXCLUDED)*

You may be eligible to request a Driving Safety Course to dismiss an alleged offense. You must enter a plea in person or in writing of **no contest** or **guilty** on or before the answer date on the notice to appear/citation and: present in person or by counsel to the court a request to take the course; **or** send the court a written request to take the course by **certified mail, return receipt requested**, postmarked on or before the answer date on the notice to appear/citation. **You MUST receive permission from the Court before taking Course.**

**QUALIFICATIONS: Initial each requirement met.**

You are eligible to request this course if you:

- \_\_\_\_\_ Have a Valid Texas Driver's License
- \_\_\_\_\_ Have not requested or taken the course within the last 12 months and / or are not presently taking
- \_\_\_\_\_ Have not committed the offense of speeding in excess of 24 mph over the speed limit
- \_\_\_\_\_ Have not committed a serious traffic violation

**WRITTEN REQUEST: Initial each**

\_\_\_\_\_ I hereby plead **NO CONTEST** and request a **Driving Safety Course**. By signing the bottom of this form I swear or affirm that I meet the requirements stated above.

\_\_\_\_\_ I ENCLOSE proof of **FINANCIAL RESPONSIBILITY** (insurance) and a **PHOTO COPY of VALID TEXAS DRIVER'S LICENSE**

\_\_\_\_\_ I ENCLOSE a **CASHIER'S CHECK** or **MONEY ORDER** made payable to the **Hon. Ronnie L. Daniell, Justice of the Peace Precinct #2, P. O. Box 9 Canton, TX 75103** in the amount of **\$108.10** (Includes \$98.10 Court Cost & \$10.00 Administration Fee) **Credit Cards accepted by phone or in office only.**

\_\_\_\_\_ I ENCLOSE a **SELF-ADDRESSED, STAMPED BUSINESS SIZE ENVELOPE** in which the Court will mail to me an application for a certified copy of my Driving Record which I will send to Austin. with the proper fee as required by law.

**I understand that I am responsible for completing a State approved Driving Safety Course and remitting the proper completion certificate & certified copy of my driving record to the Court before the expiration of 90 days. Failure to return said certificate and record may result in WARRANTS being issued.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

SWORN TO AND SUBSCRIBED TO BEFORE ME this the \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public, State of \_\_\_\_\_

Name (PLEASE PRINT OR TYPE AS IT APPEARS ON YOUR DRIVER'S LICENSE) \_\_\_\_\_ Driver's License Number \_\_\_\_\_

Current Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Citation Number / Date of Citation / Date of Birth / Date Cited to Appear on or Before \_\_\_\_\_