



co.elay.tx.us

MUNICIPAL COURT

CITY OF HENRIETTA

P.O. Box 71

Henrietta, TX 76365-0071

(940) 538-6531

1. This Letter is furnished as a Courtesy to you by the Municipal Court - City of Henrietta, to assist you in making Disposition of the Charge(s) filed against you. **Please Note: The Judge cannot discuss the merits of a Pending Judicial Proceeding prior to Trial.**

IF YOU FAIL TO RESPOND TO THE CHARGE(S) BY THE APPEARANCE DATE SHOWN ON THE CITATION, AN ADDITIONAL CHARGE WILL BE FILED AGAINST YOU FOR VIOLATE PROMISE TO APPEAR AND WARRANTS ISSUED FOR YOUR ARREST. ADDITIONALLY, IF YOU FAIL TO APPEAR IN COURT AS REQUIRED BY LAW, YOU MAY BE DENIED THE RENEWAL OF YOUR DRIVER LICENSE AND ASSESSED AN ADDITIONAL FEE. A JUVENILE WHO FAILS TO APPEAR BY THE TIME AND DATE ON A CITATION MAY HAVE THEIR LICENSE SUSPENDED AS REQUIRED BY LAW. WARRANT FEES OF \$50.00 WILL BE ASSESSED FOR EXECUTING OR PROCESSING A WARRANT.

2. IF YOU WISH TO ENTER A NOT GUILTY PLEA and desire a Trial, please so indicate on the Reply Form on the reverse side and mail your Plea on or before the Appearance Date. The Court will notify you when you MUST appear for Trial and any other required procedures. You have the right to a Trial by Jury, unless you waive that Right.

3. IF YOU WISH TO ENTER A PLEA OF GUILTY OR NOLO CONTENDERE, please so indicate in the proper space provided on the reverse side. A plea of Nolo Contendere means that you do not contest the States Charge(s) against you. The Fine for Nolo Contendere Pleas is the same as that for a Plea of Guilty. Either Pleas indicate that you agree to waive Appearance before the Court for Trial.

Please refer to the Fine Schedule below to determine the total amount of Fine(s) and Cost set by the Court. Make your Remittance by Cashiers Check or Money Order payable to the Municipal Court - City of Henrietta, indicated at the top of this Letter. **Return your copy of the Citation and this letter with your remittance to assure proper credit if your fine is not listed call the court for fine amount.**

4. Under the Laws of the State of Texas, you may be able to request DEFERRED DISPOSITION for certain Violations. **YOU MUST APPEAR IN PERSON OR SEND WRITTEN NOTICE TO THE COURT OF YOUR REQUEST BY CERTIFIED MAIL RETURN RECEIPT REQUESTED POST MARKED ON OR BEFORE THE DUE DATE.** If you wish to use this option, read and complete the Request Form on the reverse side and return it to the Court. The Court will notify you by Return Mail if you are approved.

5. I UNDERSTAND IF I POSSESS A CDL LICENSE, I CAN NOT TAKE THE DRIVER SAFETY COURSE.

6. JUVENILES 16 AND UNDER MUST CONTACT THE COURT WITH A PARENT OR GUARDIAN.

SCHEDULE OF ACCEPTABLE FINES [EFFECTIVE JANUARY 1, 2020]

TRAFFIC VIOLATIONS

SPEEDING

1-5 MPH OVER LIMIT	\$204.00
6-7 MPH OVER LIMIT	\$214.00
8-10 MPH OVER LIMIT	\$224.00
11-12 MPH OVER LIMIT	\$239.00
13-14 MPH OVER LIMIT	\$254.00
15-24 MPH OVER LIMIT	\$284.00
25 MPH OVER LIMIT	\$334.00

OTHER VIOLATIONS

Driving While License is Invalid	\$260.00
No Driver's License**	\$210.00
Expired Driver's License*	\$210.00
Expired Registration*	\$210.00
Running Stop Sign or Red Light	\$221.00
Passing in No Passing Zone	\$221.00
No Liability Insurance***	\$300.00
Unsafe Speed/Too Fast For Conditions	\$220.00
Pass Authorized Emergency Vehicle	\$296.00
Possession or Delivery of Drug Paraphernalia	\$281.00

SEAT BELT VIOLATIONS

No Seat Belt - Driver and/or Passenger	\$160.00
Operate Vehicle With Unrestrained Passenger Younger Than 17 years of age	\$266.00
Unrestrained Child Under 8 & Less Than 49" Height In Child Safety Seat	\$266.00

**NO PERSONAL CHECKS OR COMPANY CHECKS
CASHIERS CHECK OR MONEY ORDER ONLY**

* Charges may be dismissed, if defendant remedies the defect and shows proof to the court within 10 working days and pays \$20 administrative fee.

** Charges will be dismissed upon presentation of valid driver's licenses to the court, provided the license was valid at the time the Citation was issued, and is presented to the court on or before the appearance date on the Citation.

*** Charges will be dismissed upon presentation of evidence that insurance was in effect on the vehicle driven on the date of the arrest.

**** Charges may be dismissed, if inspection sticker not expired over 60 days and defendant pays \$20 administrative fee.

* If you can not pay the fine, contact the court for other options.

* Expired Inspection - if expired over 60 days - CAN NOT be dismissed with fee

* Charges may be dismissed if defendant remedies this defect and shows proof to the court within 10 working days. An administrative fee of \$20.00 must accompany proof.

** Charges will be dismissed upon presentation of valid driver's license to the Court, provided this license was valid at the time Citation was issued, and is presented to the Court on or before the appearance date on the Citation.

*** Charges will be dismissed upon presentation of evidence that insurance was in effect on the vehicle driven on the date of arrest.

**** Please call the Court for all other Commercial Driver's License Violations for the proper Fine Amount.

REPLY FORM

Mail to the Municipal Court - City of Henrietta. Enclose your Citation with your Reply.
(Enclose a Self-Addressed, Stamped Envelope if you need a Receipt.)

Name (Print or type as it appears on your Driver's License) Driver's License Number

Current Mailing Address City, State, Zip Telephone Number

Citation Number Date Of Citation Date Cited To Appear On Or Before

CHECK ONE:

- 1. I hereby enter a Plea of NOT GUILTY and request the Court advise me of my Trial Date by Mail.
- 2. I hereby enter a Plea of GUILTY and waive Appearance for Trial. **CASHIER'S CHECK OR MONEY ORDER** in the amount of the Fine(s) is enclosed. (Make your Remittance payable to the Justice Court indicated on the reverse side of this Letter.)
- 3. I hereby enter a Plea of NOLO CONTENDERE and waive Appearance for Trial. **CASHIER'S CHECK OR MONEY ORDER** in the amount of the Fine(s) is enclosed. (Make your Remittance payable to the Municipal Court - City of Henrietta indicated on the reverse side of this Letter.)

NOTE: JUVENILES 16 AND UNDER MUST CONTACT THE COURT WITH A PARENT OR GUARDIAN.

Signature Date Fine Amount

(DETACH HERE AND MAIL WITH FINE OR NOT GUILTY PLEA TO THE COURT INDICATED ON THE REVERSE SIDE.)

(DETACH HERE AND MAIL TO THE COURT INDICATED ON THE REVERSE.)

REQUEST FORM FOR DEFERRED - Drivers Safety Course

(FAILURE TO REMIT THIS FORM ON OR BEFORE YOUR APPEARANCE DATE WILL RESULT IN INELIGIBILITY FOR THE COURSE.)

Please answer all the questions below:

- I hereby plead NOLO CONTENDERE or GUILTY.
- I possess a valid TEXAS Driver's License or Permit.
- I have NOT taken a Driving Safety Course in lieu of paying a Fine during the past year.
- I am NOT in the process of taking a Driving Safety Course to dismiss another offense.
- I have NOT completed a Driving Safety Course that is not yet reflected on my Driving Record.
- I understand I CANNOT take the Driving Safety Course in lieu of paying the Fine if I am accused of speeding 25 miles an hour or more over the posted Speed Limit.
- I ENCLOSE Proof of Financial Responsibility (Insurance). (A photocopy is acceptable - NO ORIGINALS PLEASE!!)
- I ENCLOSE a Money Order or Cashier's Check made payable to the Municipal Court - City of Henrietta, in the amount of \$144.00
- I understand that I am responsible for completing a D.P.S. approved Driving Safety Course and remitting the proper Completion Certificate to the Court. I understand I have 90 days to complete the Course and to return the Certificate.
- I understand that this Form must be **NOTARIZED**.
- I have completed and mailed the Form to D.P.S. in Austin with \$10.00.

SIGNATURE

SWORN TO AND SUBSCRIBED BEFORE ME, this, _____ Day of _____, 20____.

(SEAL)

NOTARY PUBLIC

Name (Print or type as it appears on your Driver's License) Driver's License Number

Current Mailing Address City, State, Zip Telephone Number

Race/Sex Date Of Birth

Citation Number Date Of Citation Date Cited To Appear On Or Before

FOR DEFENSIVE DRIVING

DR-1 (Rev. 5/12)

TEXAS DPS



APPLICATION FOR COPY OF DRIVER RECORD

MAIL TO: Texas Department of Public Safety, Box 149008, Austin, TX 78714-9008

DO NOT MAIL CASH. Mail check or money order payable to: Texas Department of Public Safety

Any questions regarding the information on this form should be directed to the Contact Center at 512-424-2600. Allow 2-3 weeks for delivery.

Table with 2 columns: Check Type of Record Desired, FEE. Includes options for Name - DOB - License Status - Latest Address (\$4.00), 3 Year Record (\$6.00), CERTIFIED version of #2 (\$10.00), Record of ALL Crashes/Violations (\$7.00), and CERTIFIED version of #3 (\$10.00).

Mail Driver Record To: (Please Print or Type)
Requestor's Last Name: MUNICIPAL COURT
Requestor's First Name:
Street Address: PO BOX 71
Texas Driver License Number:
City: HEINRICH TIA
State: TX
Zip Code: 76365
Daytime Telephone Number: 714-365

If requesting on behalf of a business, organization, or other entity, please include the following:
Name of business, organization, entity, etc.
Your Title or Affiliation with above
Type of business, organization, etc. (i.e., insurance provider, towing company, private investigation, firm, etc.)

Information Requested On:
Texas Driver License Number:
Date of Birth:
Suffix (SR., JR., etc.):
Last Name:
First Name:
Middle Name/Maiden Name:

Individual's Written Consent For ONE TIME Release to Above Requestor
(Requestor, if you do not meet one of the exceptions listed on the back of this form, please be advised that without the written consent of the driver license/ID card holder, the record you receive will not include personal information.)
I, _____, hereby certify that I granted access on this one occasion to my Driver License/ID Card record, inclusive of the personal information (name, address, driver identification number, etc.) to _____
Signature of License /ID Card Holder or Parent/Legal Guardian _____ Date _____

State and Federal Law Requires Requestors to Agree to the Following:
In requesting and using this information, I acknowledge that this disclosure is subject to the federal Driver's Privacy Protection Act (18 U.S.C. Section 2721 et seq.) and Texas Transportation Code Chapter 730. False statements or representations to obtain personal information pertaining to any individual from the DPS could result in the denial to release any driver record information to myself and the entity for which I made the request. Further, I understand that if I receive personal information as a result of this request, it may only be used for the stated purpose and I may only resell or redisclose the information pursuant to Texas Transportation Code §730.013. Violations of that section may result in a criminal charge with the possibility of a \$25,000 fine.
I certify that I have read and agree with the above conditions and that the information provided by me in this request is true and correct. If I am requesting this driver record on behalf of an entity, I also certify that I am authorized by that entity to make this request on their behalf. I also acknowledge that failure to abide by the provisions of this agreement and any state and federal privacy law can subject me to both criminal and civil penalties.
Signature of Requestor _____ Date _____

If you are not requesting a copy of your own record or do not have the written consent of DL/ID holder, you must provide the information requested on the reverse.