

Defendant's Name: _____
Address: _____
Citation # _____
Driver's License # _____ **Phone #** _____

REQUEST FOR DRIVING SAFETY COURSE (DEFENSIVE DRIVING)

I, _____, Defendant, hereby enter my plea of **no contest** **guilty** and request permission to complete a DRIVING SAFETY COURSE pursuant to the provisions of Chapter 543, Subchapter B of the Texas Transportation Code in lieu of paying the fines assessed for the moving violation of _____.

I swear the following statements are true:

- I have a valid Texas driver's license and am not in the process of taking a course under this provision.
- I have not completed a driving safety course which is not listed on my driving record. My driving record, as maintained by the Texas Department of Public Safety, will show that no driving safety courses have been taken within one year immediately preceding the date of this citation.
- I have included a copy of my valid Texas driver's license and proof of insurance that has my name listed as a driver on the insurance card.

I understand the following provisions:

- If a check of my driving record reveals that I have completed a driving safety course within the last year, I have been advised that the fine and fees for this offense will be due and payable immediately. I am also aware that a warrant for my arrest will be issued if I fail to pay the fine and fees due to Justice Court 4 upon notice of denial of this request.
- I understand that I must complete a driving safety course through any school approved by the Texas Education Agency. Upon completion of the course, I will be provided a Certificate of Course Completion, which must be presented to Justice Court 4 on or before 90 days after the date of this request.
- I further agree to pay the fee of \$113.00 to cover the cost of administration of this request and the related court costs. (If mailing, please include a money order or in-state check for this amount).
- I also understand it is my responsibility to obtain a copy of my driving record from the State of Texas as required.

I further understand that failure to comply with all of the above requirements and conditions will result in the issuance of a warrant for my arrest.

Signed on _____, _____
Affiant's Signature

Signed and sworn to before me, the undersigned authority on the _____ day of _____, _____

Clerk of the Court or Notary Public for the State of Texas

Please mail your completed request for deferred adjudication to: Justice Court 4
P O Box 1496
Frisco TX 75034

If you have questions or need more information, you may contact the Court at 972/731-7308