



**SWORN REQUEST FOR DEFERRED DISPOSITION (Probation)**



My name is \_\_\_\_\_ and I received Citation Number \_\_\_\_\_ for the offense of \_\_\_\_\_.

I understand that I may have this charge dismissed by Deferred Disposition. I understand that I can only make this request **PRIOR to the court date indicated on my citation**. I also understand that I must meet all eligibility requirements to receive the court's permission. I also understand that Deferred is a privilege, not a right, offered solely by the discretion of the Court.

**I swear the following statements are true:**

1. I waive my right to trial and enter my plea of **NO CONTEST**. I was charged with an offense eligible for Deferred and have verified this fact with the Court.
2. I was not charged with exceeding the posted speed limit in excess of 25 miles per hour.
3. I do not possess a commercial driver's license in any state.
4. I have not had probation for dismissal of a traffic citation within the six (6) month period prior to the issue date of my ticket. I am not currently on probation for any citation in any other Court.
5. I am enclosing **PAYMENT** of the probationary fees in the amount of \$ \_\_\_\_\_ along with this request. (I called the Lufkin Municipal Court at **(936) 633-0513** to obtain this amount.)
6. **AFTER** receiving approval from the Judge, I will receive a copy of my probation order mailed to my address provided below. I understand that I will be placed on Probation for a period of time not to exceed (6) months and **IF I VIOLATE** any term of my probation, this citation will not be dismissed and a conviction will be reported to the Texas DPS.
7. If I am under 25 years of age I understand I must also complete a Driver's Safety Course and show proof to the Court of completion within 90 days from this request.

Defendant's Signature

\_\_\_\_\_

Mailing Address (PRINT CLEARLY):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SWORN TO AND SUBSCRIBED** before me by Defendant, on this the \_\_\_\_\_ day of \_\_\_\_\_ (Year) \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, STATE OF \_\_\_\_\_

(Seal)

\*If you are not making this request in person, this form must be signed before a Notary Public.

**PLEASE NOTE, INSUFFICIENT REQUEST WILL BE DENIED!!!!**

**Lufkin Municipal Court 300 E. Shepard Ave.  
P.O. Box 190  
Lufkin, Texas 75902-0190  
Phone: (936) 633-0513  
Fax: (936) 639-9646**