

VIOLATION DATE ON OR ABOUT	AT LOCATION REF. TRAFFICWAY	M.M. BLOCK #	CITY/COUNTY OF
-------------------------------	--------------------------------	-----------------	----------------

THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF TENNESSEE

DRIVER'S LICENSE NO.	STATE	EXPIRES	CLASS	CDL	<input type="checkbox"/> YES <input type="checkbox"/> NO	PHOTO ID MATCHED	<input type="checkbox"/> YES <input type="checkbox"/> NO	NAME: LAST			FIRST	MIDDLE	SFX
----------------------	-------	---------	-------	-----	---	---------------------	---	------------	--	--	-------	--------	-----

ADDRESS				<input type="checkbox"/> IF NEW ADDRESS	<input type="checkbox"/> VIOLATOR <input type="checkbox"/> PASSENGER	CITY	STATE	ZIP CODE
---------	--	--	--	---	---	------	-------	----------

EMPLOYER										EMP LOCATION		
DATE OF BIRTH	AGE	RACE	SEX	HEIGHT	WEIGHT	EYES	HAIR	BAC	RESIDENTIAL PHONE NO.	CELL/PAGER PHONE NO.	WORK PHONE NO.	

DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND

VEH LIC NO	STATE	EXPIRES	VEH YR	MAKE	MODEL	STYLE	COLOR
------------	-------	---------	--------	------	-------	-------	-------

TR #1 LIC NO	STATE	EXPIRES	TR #2 LIC NO	STATE	EXPIRES	US DOT #
--------------	-------	---------	--------------	-------	---------	----------

OWNER/COMPANY IF OTHER THAN	ADDRESS	CITY	STATE	ZIP CODE	16+ PASSENGER SCHOOL ZONE
-----------------------------	---------	------	-------	----------	------------------------------

CRASH	<input type="checkbox"/> YES <input type="checkbox"/> NO	IN-CAR VIDEO?	<input type="checkbox"/> YES <input type="checkbox"/> NO	VEH SPEED	IN A	ZONE	RADAR PACE	LIDAR OTHER	COMMERCIAL VEHICLE	<input type="checkbox"/> YES <input type="checkbox"/> NO	HAZMAT Involved?	<input type="checkbox"/> YES <input type="checkbox"/> NO	HAZMAT Placard Required?	<input type="checkbox"/> YES <input type="checkbox"/> NO	CONSTRUCTION ZONE WORKERS PRESENT
-------	---	---------------	---	-----------	------	------	------------	-------------	--------------------	---	------------------	---	--------------------------	---	-----------------------------------

DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES

1. VIOLATION/STATUTE CODE	AMOUNT \$
2. VIOLATION/STATUTE CODE	AMOUNT \$
3. VIOLATION/STATUTE CODE	AMOUNT \$
4. VIOLATION/STATUTE CODE	AMOUNT \$
5. VIOLATION/STATUTE CODE	AMOUNT \$

In consideration of my not appearing in Court, I the undersigned, do hereby enter my appearance on the Affidavit for the offense charged on this notice and WAIVE the reading of the Affidavit in the above named cause and the right to be present at the trial of said action. I hereby enter a plea of Guilty and waive the right to prescoute, appeal or error proceedings. I understand the nature of the charge(s) against me; I understand my right to have counsel and I waive this right and the right to a continuance. I waive my right to trial before a judge or jury. I plead GUILTY to the charge(s), being fully aware that my signature to this plea will have the same effect as a judgment of this court and that a record of it will be sent to the Tennessee Department of Safety Records Section.

Check one of the 2 boxes below, sign, date, and mail this form to:

Court _____
Address: _____

ON _____ THE _____ DAY OF _____ AT _____

YOU MUST APPEAR IN COURT, THE OFFENSE FOR WHICH YOU HAVE BEEN CHARGED CAN NOT BE PAID BY MAIL. FAILURE TO APPEAR CONSTITUTES THE SEPARATE OFFENSE OF CONTEMPT OF COURT. FAILURE TO APPEAR TO ANSWER OF SATSIFY THIS CITATION WILL BE THE SAME AS A CONVICTION AND WILL RESULT IN THE SUSPENSION OF YOUR LICENSE.

YOU MAY PAY BY MAIL. IF YOU WISH TO PLEAD GUILTY TO THE OFFENSE CHARGED AGAINST YOU, YOU MUST SIGN THE WAIVER PRINTED BELOW AND MAIL THIS COPY OF THE CITATION AND THE PRESCRIBED AMOUNT SET BY THE COURT.

DATE ISSUED	TOTAL AMOUNT \$
I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF TENNESSEE THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND MY REPORT WRITTEN ON THIS DOCUMENT OR ATTACHED TO THIS INFRACTION IS TRUE AND CORRECT.	
OFFICER	BADGE#

SERVED ON VIOLATOR SENT TO COURT FOR MAILING REFERRED TO PROSECUTOR

NOTICE OF CITATION FAILURE TO APPEAR IN COURT ON THE DATE ASSIGNED BY THIS CITATION OR AT THE APPROPRIATE POLICE STATION FOR BOOKING AND PROCESSING WILL RESULT IN YOUR ARREST FOR A SEPARATE CRIMINAL OFFENSE WHICH IS PUNISHABLE BY A JAIL SENTENCE OF ELEVEN (11) MONTHS AND TWENTY-NINE (29) DAYS AND/OR A FINE OF UP TO TWO THOUSAND FIVE HUNDRED DOLLARS (\$2,500)

NOTICE THE COURT WILL ISSUE A WARRANT FOR THE ARREST OF ANY DEFENDANT WHO HAS FAILED TO RESPOND TO A TRAFFIC NOTICE DULY SERVED UPON HIM/HER AND UPON WHICH AN AFFIDAVIT HAS BEEN FILED.

My mailing address is: **(PLEASE PRINT)** Telephone: Home: _____

Name: _____ Work: _____
Street or PO Box _____ Apt: _____

City: _____ State: _____ Zip Code: _____

Is interpreter needed? Language: _____

I UNDERSTAND THE ABOVE NOTICE AND THAT MY SIGNATURE IS NOT AN ADMISSON OF GUILT.

X _____
(VIOLATOR'S SIGNATURE):

X _____
(SIGNATURE):