

**ALVARADO MUNICIPAL COURT
SWORN REQUEST FOR DRIVING SAFETY COURSE (DSC)**

My name is _____ and I received Citation Number _____ for the alleged offense of _____. I understand that I can only make this request within 30 calendar days from the issuance of the citation. I also understand that I must receive the Courts' permission BEFORE taking the course.

I swear that the following statements are true:

1. I waive my right to a jury trial and enter my plea of **NO CONTEST**.
2. I was not charged with speeding more than 24 mph over the posted speed limit.
3. I was charged with an offense eligible for DSC and have verified this fact with the Court.
4. I do not possess a commercial drivers' license (CDL) in any state and did not possess a CDL on the date of the offense.
5. I am providing the Court with a COPY of my valid Texas Drivers' License and Proof of Current Texas Liability Insurance with my name listed as a covered driver that is valid the day of this request.
6. I will PAY TODAY in the form of a cashier's check or money order made payable to the City of Alvarado, the State Costs and Fees in the amount of **\$144.00** or **\$169.00** (if the offense was issued in a School Zone).
7. I am not in the process of taking a DSC under Sec. 45A.352 of the Code of Criminal Procedure, which is not reflected in my driving record as maintained by the Texas DPS.
8. I have not completed a DSC for the dismissal of a traffic citation within a twelve (12) month period preceding the date of this violation.
9. I understand that AFTER receiving approval from the judge, I will receive from the court an instruction packet by mail/email at the address provided by me, and I will read it carefully. I will complete my Driving Safety Course and obtain my driving record NO LATER than 90 days from the date that my request has been approved by the Court. I will provide to the Court BOTH (a) the signed "COURT COPY" of my DSC Certificate, and (b) my Certified Driving Record (type 3A) issued by the Texas Department of Public Safety (DPS).
10. I, the undersigned Defendant, affirm that I understand that if I do not submit this document along with proper identification and insurance proof by mail to 104 W College Ave, Alvarado, Texas 76009, I have not disposed of the above referenced case and will still need to appear in the court no later than my appearance date on my citation to resolve the case.
11. If I do not complete the terms of the Driving Safety Course, I will be sent a notice to appear in court to show cause why I did not complete the terms of this deferral. If cause is not sufficient, I understand that the Driving Safety Course will be revoked and I will be found guilty of the offense and ordered to pay the fine. I understand that if found guilty, a conviction will be reported to the Department of Public Safety and placed on my driving record.

DECLARATION

My name is _____, my date of birth is _____.

I declare under penalty of perjury that the forgoing is true and correct.

Signed this the _____ day of _____, 20_____.

DECLARANT SIGNATURE (*no typed signatures*)

STREET ADDRESS

CITY, STATE, AND ZIP

PHONE NUMBER

EMAIL ADDRESS

NOTE: Submit this request with a copy of your valid Texas Drivers' License and proof of Current Motor Vehicle Liability Insurance coverage. **INSUFFICIENT REQUESTS WILL NOT BE PROCESSED.**