REQUEST FOR DRIVERS SAFETY COURSE {FAILURE TO REMIT FORM & PAYMENT ON OR BEFORE YOUR APPEARANCE DATE WILL RESULT IN INELIGIBILTY}

Name {Print or type as it appear	rs on your driver's licen	ıse}	Driver's License Number
			a ⁰
Current Mailing Address	City, State, Zip		Telephone Number
Date Of Birth			Citation Number
	•		
Please Indicate TRUE or FALSI for the Driver Safety Course at	E next to each statemen nd fill out a reply form	nt listed. If any are	FALSE you are not eligible
I hereby plea NOLO CONTENI have NOT taken a driving sar	lely course in the nast 1	2 months	
1 am not in the process of taking	g a driving safety cours	se to dismiss another	roffense
I have not completed a driving _I understand that I CANNOT to	safety course that is no	it yet reflected on m	y driving record
T and cistand mat I CAMANAL C	ake the driving safety c	ourse if I was issued	commercial driver's license
W OIRCIS I ICSCILL			
I understand that I CANNOT to posted speed limit	ake the driving safety c	ourse if I am accused	d of speeding 25 over the
_ I ENCLOSE a valid photo COI	PY of my Texas Driver	's License or permit	Or proof of A ative Military
service if a posses a no-rexas mil	er's ncense	2 23 collect of perimit	or proof of Active Miniary
_I ENCLOSE proof of insurance	e card		
_Instead of paying the fine, I ENCASH OR PERSONAL CHEC	se {Made to Crawford	143.90{ or \$168.90 Municipal Court)	if in school zone} to pay the
_I ENCLOSE a self address stam _I understand I will need to prov	iped envelope, in which	h Court will mail do	cuments to me.
ww.aps.texas.gov. { Failure to d	lo so will invalidate m	v request for driver	r co fatra a a mana)
_1 understand that I am responsib	ole for completing Texa	is DPS approved driv	ver safety course before 90
lay extension and remitting it to t _I UNDERSTAND this must be :	ne court { The Signed (Court Copy]	200000000000000000000000000000000000000
_If I mailed, I understand this for	NUIAKIZED rm must be Certified M	loi1	
LEASE SUBMIT ALL REQUIR SC AFTER ALL DOCUMENTA	ED DOCUMENTATION IS CERTIFIED	ON BEFORE TAKII MAILED OR BRO	NG DSC. YOU MAY START UGHT TO THE COURT.
ignature of Defendant Requesting	DSC	SWORN TO AND	SUBSCRIBED BEFORE ME
2.2740001118	,	this day o	.20
		Signatur	e of Notary Public

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Mail To Crawford Municipal Court Po Box 7 Crawford , Texas 76638 If You have any Question call the Court at 254-486-2125