

**KENEDY COUNTY**



**JUSTICE OF THE PEACE, PCT 3**

Honorable Judge C. G. SCHULZ  
220 La Parra Ave./PO Box 8 ~ Sarita, TX 78385 ~ P. (361) 294-5786 F. (361) 294-5788  
Email: leticia.vela@co.kenedy.tx.us

**Deferred Disposition Request**

For all offenses **EXCEPT** No Insurance, No Driver's License, and Driving While License Invalid

\_\_\_\_\_  
Defendant's Name as on citation (Print)

\_\_\_\_\_  
Citation Number

Answer Yes or No to the following questions:

- |                          |                          |  |
|--------------------------|--------------------------|--|
| <b><u>Yes</u></b>        | <b><u>No</u></b>         |  |
| <input type="checkbox"/> | <input type="checkbox"/> | Are you on deferred disposition (probation) for any other citation in Kenedy County, Pct. 3? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you received another citation for this charge within the past twelve (12) months?       |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you completed an approved Driver's Safety Course in the past twelve (12) months?        |
| <input type="checkbox"/> | <input type="checkbox"/> | Was there an accident involved at the time you received your citation?                       |
| <input type="checkbox"/> | <input type="checkbox"/> | Were you cited for driving 25 mph or more over the posted speed limit?                       |

***Note: Persons holding a valid CDL - Commercial Driver's License are ineligible for deferred on moving violations.***

**AFFIDAVIT**

**Initial each statement that is applicable:**

\_\_\_\_\_ I have a valid driver's license or permit (from the state of residency).

\_\_\_\_\_ I have proof of insurance, and I am listed as a driver on the insurance policy or insurance card.

**Plea** (You MUST enter a plea before the Judge will consider your request for deferred disposition.)

I hereby enter my plea of **(Initial One)** \_\_\_\_\_ No Contest OR \_\_\_\_\_ Guilty

To the offense of \_\_\_\_\_ and ask the court grant me Deferred Disposition. I understand that as a condition of my deferment, I cannot commit an offense against the State of Texas while under this court order. Furthermore, I understand that if I am under the age of 25, by law, I will be required to take a driver's safety course to receive deferred disposition. I also understand that if my request is denied, a Judgment of ***Convicted*** will be entered, which may result in

the conviction being reported of my driving record.

**Initial One:**

\_\_\_\_\_ I plan to pay any fees in full which will include a \$25 special expense fee for deferred. Call the court at 361-294-5786 for fees.

\_\_\_\_\_ I am not indigent, but I request that I be allowed to pay out by installments, the fee(s) and cost pursuant to the terms and conditions set by this Court.

\_\_\_\_\_ I am indigent and request an Indigency Hearing. I request that I be allowed an alternative sentence as prescribed by the Court.

\_\_\_\_\_  
Defendant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant's Address

\_\_\_\_\_  
Driver's License

\_\_\_\_\_  
Defendant's City, State, Zip

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Defendant's Email

\_\_\_\_\_  
Phone Number