

IN THE COUNTY COURT OF THE
FIFTH JUDICIAL CIRCUIT, IN AND
FOR CITRUS COUNTY, FLORIDA

STATE OF FLORIDA
VS

CASE NO: _____
CITATION NO: _____

DEFENDANT'S NAME

WRITTEN PLEA OF NOT GUILTY AND REQUEST FOR HEARING

I, the above-named defendant, hereby acknowledge that I have been charged with a traffic infraction/ordinance violation in the County Court of Citrus County, Florida and I wish to enter a plea of NOT GUILTY to the charge. I hereby request that the Citrus County Clerk's Office schedule my case for a hearing. I understand that by making this election I waive my right to the schedule of specified civil penalties.

I understand that at the hearing, the judge may impose one or more of the following penalties:

- In most cases a civil penalty not to exceed \$1,000.00; some infractions may be over a \$1,000.00 civil penalty. Section 318.14(5), FL Statute
- Mandatory attendance at a driver improvement school; Section 318.12(5), FL Statute
- Revocation or suspension of driving privileges: Section 316.655(5), FL Statute
- If ordered by the Court to pay court costs and fines, payment is required at the conclusion of the hearing.
- If you are unable to pay fines and costs in full, you may enroll in the Clerk's Payment Plan for \$25.00, due at the time of enrollment.

I understand that I will be notified by email, if provided or by U.S. mail of my date to appear before the court. I further understand that the hearing cannot be canceled or postponed except by the Court.

Hearings are held one (1) Friday per month at 9:00 am. The hearing requires the attendance of a county court judge or hearing officer, one or more law enforcement officers, all witnesses, a Deputy Clerk of the Court, and a bailiff from the Sheriff's Office. If a continuance is necessary a motion must be submitted no less than fifteen (15) business days before the scheduled hearing date; otherwise the hearing will be held at the scheduled time without your presence. **You must be on time. Your name will be called as it listed on the docket; the Court will not wait for you. You should plan to be in Court for 2 hours or longer.**

I HEREBY CERTIFY that my address below is true and correct and that I will notify the Clerk's office in writing of any change in said address within three (3) business days of such change.

Date

Signature of Defendant

Mailing Address, City State and Zip Code

Telephone number

Email Address

The following information must be provided:

Was there any injury to anyone involved in the incident? (Select One) Yes No

Are there any dates you will be unavailable in the next 60 days? _____ (this does not guarantee that your case will not be scheduled on a particular date)

Do you have a commercial driver's license? (Select One) Yes No If yes, please initial below:

_____ **I understand that changes implemented by the Florida Department of Highway Safety and Motor Vehicles mean that withheld adjudication on a CDL license may not be recognized by the Department even if it was ordered by a Judge or Hearing Officer. The Clerk's Office can only report the information as ordered and has no control over the final recording of the information.**

EMAIL THIS FORM TO: citations@citrusclerk.org , Fax to: 352-341-6413

Or Mail to: Citrus County Clerk of Court and Comptroller
110 N Apopka Ave., Inverness, FL 34450