

**ITALY MUNICIPAL COURT**

Physical address - 161 W. Main St., Italy, TX 76651

Mailing address - PO BOX 840, ITALY, TEXAS 76651

Phone - 972 483-7329, EXT. 106

City Website - [www.ci.italy.tx.us](http://www.ci.italy.tx.us)

Court Clerk e-mail address: [cteer@italycityhall.org](mailto:cteer@italycityhall.org)

OFFICE HOURS: MONDAY-FRIDAY 8:00 AM TO 5:00 PM

**FOR FINE AMOUNTS OR TO SIMPLY PAY YOUR CITATION GO TO [www.govrec.com](http://www.govrec.com). Follow the instructions to see amount(s) owed.**

The citation issued to you by an Italy Police Officer will result in a complaint being filed against you in this court.

This letter is furnished as a courtesy to you by the MUNICIPAL COURT OF ITALY, OF ELLIS COUNTY, TEXAS to allow you to take care of this matter by mail if you so desire. Your options are listed below and on the back of this form. Please read them all carefully and complete the appropriate section and submit all paperwork required to fulfill the requirements for approval. If any piece of required documentation is omitted, all paperwork will be returned with a letter stating what is missing. You will need to resubmit with all required paperwork to be eligible for DRIVER SAFETY COURSE OR DEFERRED DISPOSITION.

PLEASE NOTE: THE JUDGE CANNOT DISCUSS THE MERITS OF A PENDING JUDICIAL PROCEEDING PRIOR TO TRIAL. IF YOU FAIL TO RESPOND TO THE CHARGE(S) BY THE DATE SHOWN ON THE CITATION, AN ADDITIONAL CHARGE WILL BE FILED AGAINST YOU FOR VIOLATING PROMISE TO APPEAR. THE DEPARTMENT OF PUBLIC SAFETY WILL DENY RENEWAL OF YOUR DRIVER'S LICENSE AND WARRANTS MAY BE ISSUED FOR YOUR ARREST. A JUVENILE WHO FAILS TO APPEAR BY THE TIME AND DATE ON A CITATION MAY HAVE HIS/HER LICENSE SUSPENDED AS REQUIRED BY LAW. NOTE: JUVENILES 16 & UNDER MUST APPEAR IN COURT WITH PARENT OR GUARDIAN. ALL PROVISIONAL DRIVER'S LICENSE HOLDERS WILL BE REQUIRED TO RE-TAKE THE DRIVER'S TEST UPON CONVICTION OF MOVING VIOLATIONS.

**OPTION 1 – PAYMENT OF FINES OR NOT GUILTY PLEAS**

CHECK ONE:

\_\_\_\_\_ 1. I hereby enter a plea of GUILTY or NO CONTEST (circle only one) to the charges of \_\_\_\_\_ and waive jury trial and appearance for trial. Enclosed is my citation and a MONEY ORDER OR CASHIER'S CHECK (NO PERSONAL CHECKS OR CASH) for the fine amount made payable to the Italy Municipal Court.

\_\_\_\_\_ 2. I hereby enter a plea of NOT GUILTY to the charge of \_\_\_\_\_ and request a NON JURY TRIAL / JURY TRIAL (CIRCLE ONLY ONE). You will be notified by mail of your trial date.

(Mail to the Municipal Court indicated at the above address on this form. Enclose a copy of the citation with your reply. Enclose a self addressed stamped envelope if you need a receipt.

\_\_\_\_\_  
Name (Print or type as it appears on your driver's license) Citation Number

\_\_\_\_\_  
Current Mailing Address City, State, Zip Telephone Number

\_\_\_\_\_  
Signature Date Amount Paid

**OPTION 2 – ALTERNATIVES TO PAYMENT**

If you are unable to pay the full amount on or before your appearance date, you may apply for installments by contacting the court clerk at the phone number above. A one time fee of \$15 will be added for each violation you request for installments. You must pay an initial payment for court costs in the amount of \$134.00 to get the payment plan started.

**OPTION 3 – REQUEST FORM FOR DRIVING SAFETY COURSE**

**IF YOU CHOOSE OPTION 3, DO NOT PAY THE FULL CITATION AMT. ONLY PAY THE AMOUNT OF \$144.00 FOR DSC.**

**(This section does not apply to holders of Commercial Driver’s License)**

FAILURE TO REMIT THIS FORM ON OR BEFORE YOUR APPEARANCE DATE WILL RESULT IN INELIGIBILITY FOR THE COURSE.

THERE WILL BE NO EXTENSIONS

A Driver’s Safety Course Deferral may dismiss some violations. This following affidavit must be completed, signed and notarized. In order to take a driver’s safety course in lieu of a conviction being entered on my driving record, I hereby state under oath:

1. True or False (circle) – I have requested the safety course on or before my answer date either in person or by mail.
2. True or False (circle) – I hold a valid Texas Driver’s License (copy enclosed)
3. True or False (circle) – I have not had a safety course in the last 12 months or presently enrolled in a safety course to have a traffic citation dismissed.
4. True or False (circle) – I was not going more than 24mph over the posted speed limit.
5. True or False (circle) – I was not going over 95 mph.
6. True or False (circle) – I have proof of financial responsibility liability insurance (copy enclosed).
7. True or False (circle) – I am enclosing a self-addressed, stamped envelope.
8. True or False (circle) – I am enclosing a cashier’s check or money order (NO PERSONAL CHECKS, CASH OR ONLINE PAYMENTS WILL BE ACCEPTED) in the amount of \$144.00 made payable to the Italy Municipal Court in Italy, Texas.
9. I hereby enter a plea of GUILTY OR NO CONTEST (circle only one) to the charge of \_\_\_\_\_, and request the safety course deferral. I understand I will be required to pay a fee to the safety class of my choice and I am responsible for enrolling in a STATE CERTIFIED SAFETY COURSE, designed for my violation and getting a copy of my TYPE 3A DRIVING RECORD at www.dps.texas.gov.

\_\_\_\_\_  
Name Mailing address

\_\_\_\_\_  
Signature Date Telephone Number Citation Number

SWORN TO AND SUBSCRIBED BEFORE ME this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_

**NOTARY PUBLIC**

**OPTION 4 – REQUEST FORM FOR DEFERRED DISPOSITION (PROBATION)  
REMIT THIS FORM ON OR BEFORE YOUR APPEARANCE DATE**

If you are under the age of 25 and request Deferred Disposition you will be required to take a Driving Safety Course. If you hold a CDL or Speeding 24mph over the posted speed limit or were Speeding over 95mph, you are NOT eligible. Deferred will be granted to violators at the Judge’s discretion. Fee for probation is the fine amount and must be paid in full at time of request. You will be placed on probation for no more than 180 days

Deferred Requirements 1) Submit this form signed and dated. 2) Self-addressed stamped envelope. 3) Fine amount in the form of a, (Money Order or Cashier’s Check Only). NO PERSONAL CHECKS, CASH OR ONLINE PAYMENTS WILL BE ACCEPTED.

Plea - Check one Guilty \_\_\_\_\_ No Contest \_\_\_\_\_

\_\_\_\_\_  
Name Mailing Address

\_\_\_\_\_  
Signature Date Telephone Number Citation Number