**PLEASE MAKE SURE YOU FILL OUT THIS FORM ENTIRELY AND FOLLOW THE INSTRUCTIONS BELOW:**

Please print out this form and fill it out, making sure you print clearly.

You are NOT required to complete this form, but if you decide to enter this conditional plea of no contest, it is your responsibility to make sure the form is completed and filed with the Clerk of Courts.

Once the form is completed, you may

1. Go back to [www.9thTraffic.org](http://www.9thTraffic.org) and upload the form, using the link found under “Once you have completed this form, you may upload it…..” This link automatically uploads the form to the Osceola County Clerk of Court.
2. Drop off the form at any Osceola County Clerk of Court location. You may find their location at [www.osceolaclerk.com](http://www.osceolaclerk.com); or
3. Send it by US Mail to: Osceola County Clerk of Court, 2 Courthouse Square, Kissimmee, FL. 34741

YOU HAVE **30 DAYS** FROM THE DATE OF THE NOTICE YOU RECEIVED TO EITHER COMPLETE THIS FORM OR FILL OUT THE FORM TO SCHEDULE A VIRTUAL TRAFFIC HEARING. IF YOU FAIL TO TAKE ANY ACTION, YOUR DRIVER’S LICENSE MAY BE SUSPENDED.

IN THE COUNTY COURT OF THE NINTH JUDICIAL CIRCUIT

IN AND FOR OSCEOLA COUNTY, FLORIDA

STATE OF FLORIDA CASE NO.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 CITATION NO.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

v.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

Defendant.

CONDITIONAL PLEA OF NO CONTEST

VERIFIED STATEMENT OF ADMISSION AND

WAIVER OF APPEARANCE

Under penalty of perjury, I swear or affirm as follows [please print clearly]:

1. My name, address and telephone number are: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

1. My email address is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
2. My date of birth is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
3. Traffic citation number(s) [please attach a copy of each citation, if available]: \_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

1. I am the defendant in the above-referenced case and I have been charged with the following violation(s) [please list the charges as you understand them to be]: \_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

1. This is not an admission that I violated any law. This is a conditional plea of no contest to the citation(s) I have listed above. I am requesting the Court to **withhold the adjudication of guilt** on the above listed citation(s) so that I will be assessed **no points** on my driving record. If the Court rejects my conditional plea of no contest, I understand that my case will be set on a regularly scheduled civil traffic infraction pre-trial docket and this conditional plea form will **not** be considered as evidence that the civil traffic infraction was committed in any future proceeding.
2. I understand that if the Court accepts my conditional plea of no contest, adjudication of guilt will be withheld on the above-listed citation(s) so I will be assessed **no points** on my driving record, but I also understand I will be required to comply with the conditions that the Court imposes – which may include the payment of applicable fines, fees, costs and any other imposed sanction (i.e. driver improvement school) – within **120 days** or my driver’s license may be suspended. The Court may impose fines up to $500, except for cases of unlawful speed in a school or construction zone where the fine may be up to $1000.
3. If my citation(s) involve(s) improper equipment or failure to display a valid driver’s license, valid insurance or a valid registration, I have attached: proof that any equipment defect has been repaired; a copy of my current valid driver’s license; proof of valid insurance; or a copy of my valid motor vehicle registration.

**I hereby plead NO CONTEST** and file this verified statement as an explanation of what happened and as a statement that the judge or hearing officer can consider before determining any punishment. By pleading no contest, I understand that I am not admitting or denying that the infraction was committed, but I do not contest the charges. I understand that if this plea is accepted, the judge or hearing officer will withhold adjudication of guilt and assess no points on my driving record. I understand that I am not required to make any statement. I understand that the judge or hearing officer will determine the appropriate sentence in withholding the adjudication of guilt which may include the payment of applicable fines, fees, costs and any other imposed sanction.

I understand I am waving my personal appearance in this matter and if the plea is accepted, I will not have a final hearing before the Court. I further understand this plea is completely voluntary and if I do not complete this form, my case will be set for a civil traffic hearing in the future.

Statement of Defendant (A statement is not required. Any additional papers, documents or photos can be attached, but should be mentioned here. Add additional paper if necessary): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I understand any material misrepresentation could cause me to be prosecuted for a separate crime. Under penalties of perjury, I declare I have read the foregoing statement and the facts stated in it are true.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Defendant (Signature) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Printed name of Defendant)

If you are under the age of 18, a parent or guardian must also sign this statement.

Signature of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_