

## DEFERRED FINDING CRITERIA CHECKLIST

If you can answer **YES** to each section on the checklist below, you may be eligible for a deferred finding and ultimate dismissal of this infraction.

You must complete the attached form and return to the Wapato Municipal Court to be considered. If you have requested a hearing the completed form and payment must be returned to the court before the scheduled court date. The hearing will cancel upon receipt.

- The infraction is **NOT** the result of an accident.
- The infraction is **NOT** for Negligent Driving.
- The infraction is **NOT** for No proof of Valid Insurance.
- The infraction is **NOT** for Using a Wireless Communications Device (RCW 46.61.667)
- The infraction is **NOT** a parking violation.
- I have **NOT** had a ticket deferred within the last seven years.
- I **DO NOT** have a commercial driver's endorsement.
- I was **NOT** operating commercial motor vehicle at the time of the infraction.
- I have **NOT** had more than 5 moving violations in the past 5 years

## REQUEST TO DEFER TRAFFIC INFRACTION

Driver's License No.	State	Citation No.
Last Name	First Name	Middle Initial
Street Mailing Address		
City	State	Zip Code

### I hereby certify and agree as follows:

- I am the person named above. I agree that I have committed the infraction(s) listed on the Citation Number shown above. I ask the Court to defer entry of a finding that I committed the Infraction(s).
- I have not had another traffic Infraction deferred by any court within seven (7) years.

### I agree to the following conditions of my deferral:

- I agree to pay the required Court Administrative Fee of \$150 or equal to the penalty on the citation which ever is lower.
- The Court will dismiss my Infraction(s) if I pay the Administrative Fee.
- If I fail to pay the Administrative Fee within 120 days of the Court's granting my deferral, the court will, without further notice to me or hearing, enter a finding that I have committed the Infraction(s) listed on the Citation Number shown above and will report the finding to the Washington State Department of Licensing (DOL)
- If I have failed to pay the required Court Administrative Fee within 120 days, a \$52.00 penalty will be assessed to the original amount on the face of the citation and the court will notify DOL to begin processing my driver's license for suspension.

I hereby certify under penalty of perjury of the Laws of the State of Washington that my foregoing statements are true and correct.

Signed at \_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_\_.

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