



Sworn Request for Driving Safety Course (DSC)

STATE OF TEXAS

VS.
Name: _____

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IN THE MUNICIPAL COURT
CITY OF COLLEYVILLE/KELLER
TARRANT COUNTY, TEXAS

I hereby enter my appearance on the complaint of the offense of: _____. I understand that I have a right to a jury trial. I am requesting to take a driving safety course and am hereby waiving my right to a jury trial and plead:

(Guilty) (Nolo contendere)

I understand that I must:

- 1. Present to the court a valid Texas Driver's license or permit when requesting to take a driving safety course;
2. Present to the court proof of financial responsibility (automobile liability insurance in your name) when requesting a driving safety course;
3. Present to the court a certified copy of my driver's record from the Department of Public Safety within 90 days;
4. Present to the court a uniform Certificate of Driving Safety Course completion from a State of Texas Education Agency approved course for ticket dismissal (certified by the State of Texas) completed and submitted to the court no later than 90 days from this request; and correct City/Court name (the city you received the citation), original "COURT COPY" signed by you.
5. Pay court costs and fees of \$144.00 or \$169.00 (for citations issued in a school zone) to the court when requesting a driving safety course.

I understand that:

- 1. I can only take one driving safety course during a 12 month period.
2. If I complete a driving safety course, the charge against me will be dismissed and the court will report to the Department of Public Safety the completion date of the driving safety course for inclusion on my driving record.
3. If I fail to present proof of completion of the driving safety course within 90 days, along with the certified copy of my driving record, the court will require my appearance at a show cause hearing; and
4. If I fail to appear at the show cause hearing, the court will impose the fine and a warrant of arrest will be issued.

Defendant's Signature

Date

THIS COURT MUST RECEIVE YOUR DRIVING RECORD AND COURSE COMPLETION CERTIFICATE NO LATER THAN 90 DAYS FROM TODAY'S DATE. FAILURE TO COMPLETE AND/OR SUBMIT COMPLETE PAPER WORK WILL RESULT IN A SHOW CAUSE HEARING, WHICH COULD RESULT IN A CONVICTION ON YOUR RECORD AND THE REMAINING BALANCE DUE IMMEDIATELY.

DECLARATION

My name is _____; my date of birth is _____, my address is _____

I state under oath that I am not in the process of taking a driving safety course under Section 143A (a)(2), Art. 7601d, nor have I completed a course under that subdivision that is not yet reflected on my driver's record as maintained by the Texas Department of Public Safety in the last twelve (12) months. I declare under penalty of perjury that the foregoing is true and correct.

DECLARANT SIGNATURE

EMAIL

CELL NUMBER: _____

APPLICATION FOR COPY OF DRIVER RECORD

Mail to: Driver Records Bureau, Texas Department of Public Safety, Box 149246, Austin, Texas 78714-9246
MAKE CHECK or MONEY ORDER PAYABLE TO: TEXAS DEPARTMENT OF PUBLIC SAFETY
Any questions regarding the information on this form should be directed to Customer Service at 512/424-2600.

Allow 6-8 weeks for delivery

CHECK TYPE OF RECORD DESIRED

FEE

- | | | | |
|-------------------------------------|--------|--|----------------|
| <input type="checkbox"/> | 1. | Name – DOB – License Status – Latest Address. | \$ 4.00 |
| <input type="checkbox"/> | 2. | Name – DOB – License Status – List of Accidents/Moving Violations in Record within Immediate Past 3 Year Period. | \$ 6.00 |
| <input type="checkbox"/> | 2A. | CERTIFIED version of #2. This Record is Not Acceptable for DDC Course. | \$ 10.00 |
| <input type="checkbox"/> | 3. | Name – DOB – License Status – List of ALL Accidents and Violations in Record. Furnished to Licensee ONLY. | \$ 7.00 |
| <input checked="" type="checkbox"/> | 3A. | Certified version of #3. Furnished to Licensee ONLY and is Acceptable for Driver's Safety Course.. | \$12.00 |
| <input type="checkbox"/> | Other: | (Original Application, DWLS, etc.) _____ (If Required) | \$ _____ |

MAIL DRIVER RECORD TO: **Requestor's Name** _____ **DL Number** _____
(PLEASE TYPE OR PRINT)
Address _____
City, State, Zip Code _____ Telephone # _____

To request your driving record online, go to: texas.gov and request report 3A. \$12.00

Driver Safety Course and Texas Driving Record may be emailed to courtemail@colleyville.com,

Mailed to 5201 Riverwalk Drive Colleyville, Texas 76034, or presented in person.

INFORMATION REQUESTED ON:

Texas Driver License # _____ Date of Birth (Month/Day/Year) _____
Last Name _____ First Name _____ Middle/Maiden _____

State and federal law requires requestors to agree to the following:

In requesting and using this information, I acknowledge that this disclosure is subject to the federal Driver's Privacy Protection Act (18U.S.C. Sect. 2721 et seq.) and Texas Transportation Code Chapter 730. False statements or representations to obtain personal information pertaining to any individual from the DPS could result in the denial to release any driver record information to myself and the entity for which I made the request. Further, I understand that if I receive personal information as a result of this request, it may only be used for the stated purpose and I may only resell or redisclose the information pursuant to Texas Transportation Code §730.013. violations of that section may result in a criminal charge with the possibility of a \$25,000 fine.

I certify that I have read and agree with the above conditions and that the information provided by me in this request is true and correct. If I am requesting this driver record on behalf of an entity, I also certify that I am authorized by that entity to make this request on their behalf. I also acknowledge that failure to abide by the provisions of this agreement and any state and federal privacy law can subject me to both criminal and civil penalties.

Signature of Requestor

Date

DRIVER'S SAFETY CHECKLIST

ORDER: Your Texas Driving Record **TODAY** using the form the Court provided or by logging on to <http://www.texasonline.com>. The Court **WILL NOT** accept a driving record that was ordered after the original due date on your court order.

COMPLETE: Your driver's safety course by your due date. **THE JUDGE CANNOT BY STATE LAW ACCEPT A COURSE TAKEN AFTER THE DUE DATE, NO EXCEPTIONS.**

Remember... It will take at least **TWO (2) WEEKS** for you to receive a certificate of completion back from the course provider, and the Court **WILL NOT** accept a certificate that was completed after the original due date noted on your court order.

MAKE SURE you give the course provider the correct City name: **COLLEYVILLE OR KELLER** so that it will reflect that on your certificate of completion. The Court **WILL NOT** accept a certificate of completion with another City's name on it.

The certificate of completion must meet the following criteria:

- * It must be an original "**COURT COPY**" and be signed by you.
- * It must have the Court name.
- * It must have a completion date on or before your original due date noted on your court order.

The Court **CANNOT** recommend a specific course provider, but you may do an internet search for Texas State certified driver's safety course; you may do the course online, in person or you may obtain a driver's safety course movie from the library or video rental business.