

# AFFIDAVIT AND REQUEST TO TAKE DRIVING SAFETY COURSE

Your name: \_\_\_\_\_

Citation # \_\_\_\_\_

The above-named defendant, having been duly sworn upon oath states the following:

1. I have not completed nor am I currently taking or approved to take a Driving Safety Course (under Article 45.0511 Code of Criminal Procedure) for a traffic citation issued within one year of the date of this citation and that is not reflected on my driving record.
2. I do have a TEXAS DRIVER'S LICENSE OR PERMIT and will provide a copy of such.
3. I have a vehicle insurance policy, a certificate of self-insurance or a financial responsibility certificate. **IMPORTANT NOTE: Your request for Defensive Driving will be denied, unless you submit proof that you are INSURED as required by law. THE PROOF MUST BE ATTACHED TO THIS AFFIDAVIT. PHOTOCOPIES ONLY. ORIGINALS WILL NOT BE RETURNED.**
4. I will provide a certified copy of my five (5) year driving record from the Texas Department of Public Safety before I take the course.

**Based upon the foregoing**, I hereby waive trial by jury, enter a plea of Nolo Contendere and request that the Court defer proceedings for ninety (90) days so that I may complete an approved Driving Safety Course. I understand that I **MUST COMPLETE and RETURN an ORIGINAL COURT CERTIFICATE** showing that I have completed a Driving Safety Course which is approved by the Texas Driver and Traffic Safety Act (Article 4413(29c), Vernon's Texas Civil Statutes) to the Court as well as a \$132 payment in the form of either a **MONEY ORDER or CASHIER'S CHECK** no later than ninety (90) days from the date the citation was issued to me.

Defendant Signature\*: \_\_\_\_\_

Print Name as Shown  
On Driver's License: \_\_\_\_\_

Defendant's Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ TX DL # \_\_\_\_\_

SWORN to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public of State of Texas

\* Signature Must Be Notarized

