

**-APPLICATION-
TO REDUCE TRAFFIC INFRACTION(S)**

PLEASE PRINT CLEARLY

SECTION I:

Name: _____ Date of Birth: ___/___/___ Age: _____

Driver's License State: ___ ID#: _____

Mailing Address: _____ City: _____

State: _____ Zip Code: _____ Phone # _____ Email: _____

The date of your infraction(s): _____

How many tickets were you issued? _____ Town/Village Court: _____

Was There An Accident? No Yes

Was There Property Damage? No Yes

If Yes, Name(s) of Owner(s) of Damaged Property: _____

Was There Personal Injury? No Yes

If Yes, Name of Injured Person(s): _____

Do You Have a Lawyer? No Yes

If Yes, Lawyer's Name: _____

Lawyer's Address: _____

City: _____ State: _____ Zip Code: _____

A reduction should be granted for the following reason(s):

I understand that in making this application for a reduction, I waive all rights to a speedy trial.

NOTICE PURSUANT TO PENAL LAW § 210.45

IN A WRITTEN INSTRUMENT, ANY PERSON WHO KNOWINGLY MAKES A FALSE STATEMENT THAT SUCH PERSON DOES NOT BELIEVE TO BE TRUE HAS COMMITTED A CRIME UNDER THE LAWS OF THE STATE OF NEW YORK PUNISHABLE AS A CLASS "A" MISDEMEANOR. AFFIRMED UNDER PENALTY OF PERJURY.

Date: ___/___/___ Applicant's Signature: _____

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SECTION II.

The District Attorney's Office agrees to and recommends the following in satisfaction of the pending infraction(s): _____

Date: ___/___/___ Signature: _____

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SECTION III.

I, _____ (Defendant) do accept/ reject the above recommended plea offer in the charges against me. If I accept, I state:

1. There have been no promises made to me by the Court or the District Attorney's Office to induce me to agree to this recommendation, except as stated herein, and I accept the recommended plea offer of my own free will.
2. I hereby plead guilty and admit to the underlying acts set forth in the recommended plea offer.
3. If the Court does not approve this recommendation for any reason, I will be allowed to withdraw my plea and continue with the original charges.
4. By this declaration, I waive my opportunity to be legally tried on the original charges and confront my accusers, and I understand the nature of this waiver.
5. I understand that by agreeing with this plea offer, I also waive my right to appeal conviction and sentence.

Date: ___/___/___ Applicant's Signature: _____