United States District Court Violation Notice

(Rev. 1/2019)

Location Code Violation Number

9513619

Officer Name (Print)

Officer No.

YOU ARE CHARGED WITH THE FOLLOWING VIOLATION

Date and Time of Offense

Offense Charged CFR USC State Code

Place of Offense

Offense Description: Factual Basis for Charge

HAZMAT D

DEFENDANT INFORMATION

Last Name

First Name

VEHICLE

Tag No.

VIN:

PAY THIS AMOUNT AT

www.cvb.uscourts.gov

State

Make/Model

Year

PASS - Color

CMV -

APPEARANCE IS REQUIRED

A If Box A is checked, you must appear in court. See instructions (on reverse side).

APPEARANCE IS OPTIONAL

B If Box B is checked, you must pay the total collateral due or in lieu of payment appear in court. See instructions (on reverse side).

+\$30 Processing Fee

750.00 Forfeiture Amount

280.00

Total Collateral Due

YOUR COURT DATE

Court Address

Date

Time (hh:mm)

My signature signifies that I have received a copy of this violation notice. It is not an admission of guilt. I promise to appear for the hearing at the time and place instructed or in lieu of appearance pay the total collateral due.

X Defendant Signature

Defendant Copy

9513619