



JACK COUNTY JUSTICE OF THE PEACE, PCT. 1

JUDGE JESSICA BAILEY

100 N. Main St., Ste. 101 Jacksboro, TX 76458

940.567.2001 940.567.5029 Fax

jp@jackcounty.org

PLEASE READ CAREFULLY AND FOLLOW THE INSTRUCTIONS: The citation issued to you by a Department of Public Safety Trooper, Jack County Deputy Sheriff or a TPWD Game Warden will result in a complaint being filed against you in this court. If you fail to respond to the charges **by the appearance date on the citation**, an additional charge will be filed for Fail to Appear and the Department of Public Safety will **DENY RENEWAL** of your Driver License.

Juveniles(16 and under) and provisional license holders must appear in person with parent or guardian – please contact the court.

This letter is furnished to you through the courtesy of the court to allow you to take care of this matter by mail if you so desire. You must complete the appropriate form on the reverse side. If you desire to waive trial by jury and enter a plea of guilty or nolo contendere, enter your plea on the reply form and remit the amount shown under the fine schedule. Please make your money order or cashier's check payable to Jack County JP. You may also pay by credit/debit card.

We do not accept personal checks or cash. If you wish to contest the citation, please enter your plea on the reply form and return it to our office. You will be notified by mail of your Pre-Trial Hearing date.

JACK COUNTY JUSTICE COURT FINE SCHEDULE

Speeding Violations

Over the posted speed limit:

1 - 10 mph over.....\$190.00

11-15 mph over.....\$210.00

16-20 mph over.....\$240.00

21-24 mph over.....\$290.00

25 mph and over.....\$322.00

***25 mph and over** are not eligible
for DSC or Deferred Disposition

Speeding in a Construction Zone
with workers present must contact
the court.

****CDL HOLDERS ARE NOT ELIGIBLE**

FOR DSC OR DEFERRED DISPOSITION**

School zone citations will have an additional \$25.00 fee added

Disregard No Passing Zone.....\$200.00

****** Driver License Restriction Violation.....\$170.00

Driving While License Invalid/Suspended.....\$325.00

***** Expired or No Driver License.....\$200.00

***** Expired Vehicle Registration.....\$150.00

***** Expired Vehicle Inspection.....\$150.00

***** Fail to Change Address/Name.....\$165.00

******* Fail to Maintain Financial Responsibility (no insurance)\$325.00

Fail to Vacate/Move for Emergency Vehicle.....\$322.00

Fail to Yield Right of Way.....\$200.00

Open Container.....\$300.00

Passing or Overtaking a School Bus.....\$620.00

Ran Stop Sign or Red Light.....\$200.00

Safety Belt Violation (Driver or passenger).....\$185.00

Safety Belt Violation Child, 1st offense.....\$220.00

Safety Seat Sys, Child Passenger.....\$320.00

Unsafe Speed, Lane change, or Turn.....\$200.00

****** Use of Unauthorized Glass Coating Material.....\$170.00

FOR ANY OFFENSE NOT LISTED PLEASE CONTACT THE COURT

***(1)Charges may be dismissed if defendant remedies this defect and shows proof to the court within 20 working days.(2) Inspection certificate must NOT be expired more than 60 days. (3) Charges may be dismissed upon presentation of valid driver's license to the Court, provided this license was valid at the time citation was issued and is presented to the court on or before the appearance date on the citation. Administrative fee of \$20.00 will be collected.**

****Charges may be dismissed if defendant remedies defect/violation and shows proof to the court within 20 working days of date of violation. Administrative fee of \$10.00 will be collected.**

*****Charge will be dismissed upon presentation of evidence that insurance was in effect on the vehicle driven on the date of citation.**

REPLY FORM AND REQUEST FORM FOR DRIVER SAFETY COURSE ON REVERSE SIDE

REPLY FORM

Enclose a copy of the Citation with your reply. Enclose a self-addressed, stamped envelope or your email address if you need a receipt.

Name (Print or type as it appears on your driver's license)

Telephone Number

Current Mailing Address City, State, Zip

PAYMENT OF FINE OR NOT GUILTY PLEA (REQUEST FOR TRIAL)

CHECK ONE:

____ 1. I hereby enter a plea of **GUILTY or NO CONTEST** (Circle Only One) to the charge(s) of _____ and waive my right to a jury trial and appearance for trial.

____ 2. I hereby enter a plea of **NOT GUILTY** to the charge of _____ and request a Jury trial /Trial by Judge (circle only one). You will be notified by mail of your pre-trial date.

Enclosed is a copy of my citation and a **CASHIER'S CHECK OR MONEY ORDER** (**NO PERSONAL CHECKS or CASH ACCEPTED**) for the fine amount made payable to Jack County JP. You may also pay by **CREDIT/DEBIT** card by visiting www.certifiedpayments.net and use **BUREAU CODE 2429125**. Use your Driver License number in the Docket # field. Make sure we have an option to contact you. There will be a convenience fee for this option.

Requesting Deferred

Defendant Signature

Date

REQUEST FORM FOR DRIVING SAFETY COURSE

(FAILURE TO REMIT THIS FORM ON OR BEFORE YOUR APPEARANCE DATE WILL RESULT IN INELIGIBILITY FOR THE COURSE.)

A Driver's Safety Course Deferral may dismiss some violations (moving violations). The following affidavit must be completed, signed, and notarized. In order to take a driver's safety course in lieu of a conviction being entered on my driving record, I hereby state under oath:

____ I have requested the safety course on or before my answer date either in person or by **CERTIFIED** mail, postmarked by the due date.

____ I hold a valid Texas Driver License (**Copy Enclosed**) or I am active duty military or spouse/dependent of active duty military.

____ I have not had a safety course in the last 12 months nor am I presently enrolled in a safety course to have a traffic citation dismissed.

____ I was not going more than 24mph over the posted speed limit, or 95 mph or more.

____ I have proof of financial responsibility (Liability Insurance) (**Copy Enclosed**).

____ I will present a certified copy (Type 3A) of my Driving record from the Texas Department of Public Safety. www.txdps.state.tx.us

____ I do not hold a Commercial Driver's License.

____ I am enclosing payment of \$146.00 (**\$171.00 if in school zone**).

I hereby enter a plea of GUILTY or NO CONTEST (**circle one only**) to the charge of _____ and request the safety course deferral. I understand I will be required to enroll and pay a fee to take a Certified Driver Safety class of my choice, designed for my violation. I also understand I may not take the course until I receive approval from the court.

Defendant Signature

Date

Sworn to and subscribed to before me this the _____ day of _____, 20____.

Notary Public/Court Clerk

DEFERRED DISPOSITION

This option is available at the Judge's discretion.