

COURT OPTION FORM

Hamilton County Clerk of Court
207 NE First St, Room 106
Jasper, FL 32052

Defendant's Name: _____ Citation Number: _____

I wish to plead not guilty to my traffic citation and request a hearing. I understand that by requesting this hearing I forfeit the right to pay the civil penalty. The judge may impose an increased fine plus court costs, require completion of a driver improvement course; or both. **I also understand that, once I elect this hearing, it is a mandatory court appearance and if I fail to appear on the date provided that a suspension of my license may be issued.**

I also understand that all traffic infraction hearings are held via video conferencing (ZOOM) appearance only. I agree that I MUST have access to a computer with internet access with a webcam or a smartphone with video camera capability WHICH CAN CONNECT TO THE ZOOM APP OR WEBSITE to attend the hearing.

Signature of Defendant

Email address (required)

Printed Name of Defendant

Current Mailing Address of Defendant

Daytime Phone Number of Defendant

FORM MUST BE NOTARIZED

STATE OF _____

COUNTY OF _____

Sworn to and subscribed before me this _____ day of _____, _____ by
_____ who _____ is personally known to me or ___presented
_____ as identification.

Notary Public

Seal