

MARYLAND UNIFORM COMPLAINT AND CITATION

WITNESS

RELATED CITATION →

DRIVER'S LICENSE / SOUNDEX NUMBER CLASS STATE

DEFENDANT'S (FIRST) NAME (MIDDLE) (LAST) (SUFFIX)

CURRENT ADDRESS IN FULL

CITY COUNTY STATE ZIP CODE

HEIGHT WEIGHT RACE SEX BIRTH DATE TELEPHONE NUMBER

VEHICLE REGISTRATION STATE VEHICLE YEAR, MAKE, MODEL, TYPE, AND COLOR

VIOLATION DATE TIME  A.M.  P.I.  CONTRIBUTED TO ACCIDENT  
MONTH DAY YEAR  P.M.  P.D.  SAFETY BELTS

Yes  No HAZMAT  Yes  No COMM. VEHICLE  Yes  No CDL (LICENSE)  FATAL ACC.  A/R SUSP. REV.  
LOCATION OF OFFENSE CITY/COUNTY

MD

GPS AT LOCATION OF OFFENSE (IF AVAILABLE)

COUNTY CODE AREA ARREST TYPE DOT NUMBER

MVL DID UNLAWFULLY VIOLATE: CIRCLE VIOLATION BELOW: (ONE VIOLATION ONLY)

- 01) 21-801.1 Exceed Max. Speed \_\_\_\_\_ MPH 23) 21-301(a) Failure to Drive Right of Center  
in \_\_\_\_\_ Zone 24) 21-304(c) Driving off Road While Passing Vehicle  
02) 13-401(b) Operating Unregistered Motor Vehicle 25) 21-308(a) Driving Wrong Direction on One Way Road  
03) 13-401(h) Driving with Suspended Registration 26) 21-309(b) Unsafe Lane Changing  
04) 13-409(b) Fail to Display Reg. Card on Demand 27) 21-310(a) Following Vehicle Too Closely  
05) 13-411(a) Fail to Attach Plates at Front & Rear 28) 21-402(a) Fail to Yield to Oncoming Traffic on Left Turn  
06) 13-411(d) Driving w/o Current Tags 29) 21-707(a) Failure to Stop at Stop Sign  
07) 13-411(f) Display Expired Reg. Plates 30) 21-801(a) Speed Greater Than Reasonable  
08) 13-411(g) Display Reg. Plate Issued to Another 31) 21-801(b) Failure to Control Speed to Avoid Collision  
09) 13-703(g) Unauthorized Disp. & Use of Reg. Plate 32) 21-901.1(a) Reckless Driving  
10) 16-101(a) Driving Without License 33) 21-901.1(b) Negligent Driving  
11) 16-112(c) Fail to Display License on Demand 34) 21-902(a)(1) Driving Under Influence of Alcohol  
12) 16-113(h) Violating Lic. Restriction 35) 21-902(a)(2) Driving Under Influence of Alcohol Per Se  
13) 16-115(f) Driving With an Expired License 36) 21-902(b)(1) Driving While Impaired by Alcohol  
14) 16-116(a) Failure Notify Adm. Address Change 37) 21-902(c)(1) Driving While Impaired by Drug(s) or Drug(s)  
15) 16-303(c) Driving on Suspended Lic. & Priv. and Alcohol  
16) 16-303(d) Driving on Revoked Lic. & Priv. 38) 21-902(d)(1) Driving While Impaired by Controlled  
17) 16-303(f) Driving on Suspended Out of State Lic. Dangerous Substance  
18) 16-303(h) Driving While Lic. Suspended Under 39) 21-1117(c) Driver Spinning Wheels  
(17-106, 26-204, 26-206, 27-103) 40) 22-412.2(d) Failing to secure child under age 8 in child safety  
19) 17-107 Driving Uninsured Vehicle seat when transporting in motor vehicle  
20) 21-201(a)(1) Failure to Obey Traffic Device 41) 22-412.3(b) (Operator, Occupant Under 16) Not Restrained  
21) 21-202(h)(1) Fail to Stop at Steady Circular Red Signal by (Seat Belt, Child Safety Seat)  
22) 21-202(i)(1) Fail to Stop at Red Signal Before Right Turn 42) 22-412.3(c) Front Passenger 16 or More without Seat Belt

VIOLATION NOT ART. TITLE SUB-TITLE PARAGRAPH CODE

LISTED ABOVE  TA  BR  LO  MR  27  TG

CHARGE:

PREPAYABLE  \$25  \$50  \$70  \$80  \$90  \$110  \$120  \$130  
FINE AMOUNT  \$150  \$160  \$290  \$330  \$530  \$580  Other \$.....

NOTICE TO APPEAR

- YOU MUST APPEAR FOR TRIAL WHEN NOTIFIED BY THE COURT.
- THIS IS A PAYABLE CITATION, YOU HAVE A RIGHT TO REQUEST TRIAL TO CONTEST YOUR GUILT OR REQUEST A WAIVER HEARING REGARDING THE SENTENCE AND DISPOSITION. YOU MAY WAIVE ANY TRIAL OR WAIVER HEARING AND PAY THE FINE SHOWN. (SEE REVERSE.)

I SOLEMNLY AFFIRM UNDER PENALTY OF PERJURY THAT THE CONTENTS OF THE FOREGOING DOCUMENT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

OFFICER'S SIGNATURE:

TRIAL: DISTRICT LOC. OFFICER: AGENCY SUB-AGENCY I.D. NO.

RADAR/BREATHALYZER OPERATOR'S AGENCY SUB-AGENCY I.D. NO.  
NAME (PRINT)

WARNING - FAILURE TO SIGN MAY LEAD TO YOUR ARREST.

I SIGN MY NAME AS A RECEIPT OF A COPY OF THIS CITATION AND NOT AS AN ADMISSION OF GUILT. I WILL COMPLY WITH THE REQUIREMENTS SET FORTH IN THIS CITATION.

X DEFENDANT'S SIGNATURE:

Front Side of Citation To Be Pre-Numbered on Bottom Right Margin (White "Court Copy" and Blue "Defendant's Copy" to have Bar-Code Displayed above Citation Number)

**Note to Law Enforcement: Remove this first copy of citation before entering witness information. You may enter address of defendant as shown on driver's license if that address is different from current address.**

TO THE DISTRICT COURT:

**PLEASE SUMMONS THE FOLLOWING WITNESSES:**

\_\_\_\_\_  
NAME  
\_\_\_\_\_  
ADDRESS  
\_\_\_\_\_  
CITY STATE ZIP  
\_\_\_\_\_  
DAY PHONE ROOM #  
NIGHT PHONE APT. #  
If Law Enforcement  Agency  Sub-Agency  ID.

\_\_\_\_\_  
NAME  
\_\_\_\_\_  
ADDRESS  
\_\_\_\_\_  
CITY STATE ZIP  
\_\_\_\_\_  
DAY PHONE ROOM #  
NIGHT PHONE APT. #  
If Law Enforcement  Agency  Sub-Agency  ID.

\_\_\_\_\_  
NAME  
\_\_\_\_\_  
ADDRESS  
\_\_\_\_\_  
CITY STATE ZIP  
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DAY PHONE ROOM #  
NIGHT PHONE APT. #  
If Law Enforcement  Agency  Sub-Agency  ID.

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CITY STATE ZIP  
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DAY PHONE ROOM #  
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CITY STATE ZIP  
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ADDRESS  
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CITY STATE ZIP  
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DAY PHONE ROOM #  
NIGHT PHONE APT. #  
If Law Enforcement  Agency  Sub-Agency  ID.

Reverse Side of Copy #1  
"Court Copy"  
White



## NOTICE TO DEFENDANT

CAREFULLY AND COMPLETELY READ ALL NOTICES ON BOTH THE RETURN TO COURT AND DEFENDANT'S COPIES OF THE CITATION INCLUDING THE "IMPORTANT INFORMATION" SECTION ON THE BLUE COPY. THE DEFENDANT'S COPY IS FOR YOUR RECORDS.

**IF THIS CITATION IS MARKED "THIS IS A PAYABLE CITATION" YOU MUST COMPLY WITH ONE OF THE FOLLOWING OPTIONS WITHIN 30 DAYS AFTER RECEIPT OF CITATION:**

**1) PAY THE FULL AMOUNT OF THE PRESET FINE, INSTEAD OF APPEARING IN COURT.**

Pay the full amount of the fine at any District Court of Maryland location, or with a credit card at the Maryland Judiciary Website or by phone (see information at the top of the blue copy of the citation), or by mail as shown below.

To pay by mail:

- Make your check or money order payable to the DISTRICT COURT OF MARYLAND. Write each citation number on the front of the check or money order.
- Place your check and the RETURN TO COURT (white) copy of the citation in the attached envelope and mail it to the Court. If you received more than one citation you may place all citations in the same envelope. An additional \$10 service fee will be imposed for each dishonored check.

**2) REQUEST A WAIVER HEARING REGARDING SENTENCING AND DISPOSITION INSTEAD OF TRIAL. - PLEAD GUILTY WITH AN EXPLANATION.**

- Check the "Request a Waiver Hearing" box, sign and date below. If you received more than one citation sign the statement on each citation.
- Return this copy of the citation to the Court within 30 days in the attached envelope. If you received more than one citation you may place all citations in the same envelope.
- DO NOT SEND PAYMENT.

**3) REQUEST A TRIAL DATE AT THE DATE, TIME, AND PLACE ESTABLISHED BY THE DISTRICT COURT BY WRIT OR TRIAL NOTICE.**

- Check the "Request a Trial" box, sign and date below. You will be mailed a notice of trial date.
- Return this copy of the citation to the Court within 30 days in the attached envelope. If you received more than one citation you may place all citations in the same envelope.
- DO NOT SEND PAYMENT.

**IF YOU FAIL TO COMPLY WITHIN 30 DAYS AFTER RECEIPT OF THIS CITATION, THE MOTOR VEHICLE ADMINISTRATION WILL BE NOTIFIED AND MAY TAKE ACTION TO SUSPEND YOUR DRIVER'S LICENSE.**

**DRIVING ON A SUSPENDED LICENSE IS A CRIMINAL OFFENSE FOR WHICH YOU COULD BE INCARCERATED.**

- Request a Waiver Hearing as to Disposition (see #2 above): I admit I committed the violation in this citation, and I request a waiver hearing to explain the circumstances to a judge. I understand this is not a trial, the officer and witnesses will not be present, and my appearance in court is for sentencing only.
- Request a Trial (see #3 above): I request a trial date for the violation charged.
- Please check box on front of envelope that corresponds to the option you chose and mail payment or request for trial/waiver hearing.

Reverse Side of Copy #4  
"Return to Court Copy"  
White

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

**FOR MORE INFORMATION AND TO PAY CITATIONS**  
Visit the MD Judiciary Website at [www.mdcourts.gov/district](http://www.mdcourts.gov/district)  
or call the Interactive Voice Response (IVR) System  
for trial dates, court locations, and directions.  
From all areas including out-of-state call: **1-800-492-2656**  
TTY users call 1-800-925-9690 or  
Use Maryland Relay Services at 1-800-735-2258 or 711

## TO THE PERSON CHARGED

**IMPORTANT INFORMATION:** It is your obligation to know your trial/waiver hearing date and appear on that date. You can visit the MD Judiciary Website at [www.mdcourts.gov/district](http://www.mdcourts.gov/district) or call the IVR System (see above) to find out your trial/waiver hearing date. It may take a few weeks before a trial/waiver hearing date is set. The Court will mail a courtesy notice to the name and address shown on the front of the citation. If your name or address on this citation is not correct you must notify the Court in writing of any changes. The Post Office does not forward Court mail.

**IF CITATION IS MARKED "YOU MUST APPEAR FOR TRIAL"**

This citation is a summons to appear. The Court will automatically mail you a notice of your trial date. Please read "Important Information" above.

**IF CITATION IS MARKED "THIS IS A PAYABLE CITATION" YOU MUST COMPLY WITH ONE OF THE FOLLOWING OPTIONS WITHIN 30 DAY AFTER RECEIPT OF CITATION:**

- 1. PAYMENT** - Pay the full amount of the fine at any District Court of Maryland location, or with a credit card at the Judiciary Website or by using the IVR system (see above) or by mailing your check (made payable to the District Court of Maryland) and the RETURN TO COURT (white) copy in the attached envelope.
- 2. GUILTY WITH AN EXPLANATION** - If you wish to plead guilty and have a waiver hearing as to disposition, check the appropriate box on the RETURN TO COURT (white) copy of the citation, sign, date and return in the attached envelope. DO NOT SEND PAYMENT AT THIS TIME. You will be mailed a notice of your waiver hearing. Since there will not be a trial, the officer and witnesses will NOT be summoned. At the waiver hearing the Court will hear from you only for the purposes of imposing a sentence.
- 3. TRIAL** - If you wish to stand trial and have the officer present at the trial, check the appropriate box on the RETURN TO COURT (white) copy, sign, date, and return in the attached envelope. You will be mailed a notice of your trial date. DO NOT SEND PAYMENT AT THIS TIME.

**IF YOU FAIL TO COMPLY WITHIN 30 DAYS AFTER RECEIPT OF THIS CITATION, THE MOTOR VEHICLE ADMINISTRATION WILL BE NOTIFIED AND MAY TAKE ACTION TO SUSPEND YOUR DRIVER'S LICENSE.**

**DRIVING ON A SUSPENDED LICENSE IS A CRIMINAL OFFENSE FOR WHICH YOU COULD BE INCARCERATED.**

1. This paper charges you with committing a crime.
2. If you have been arrested, you have the right to have a judicial officer decide whether you should be released from jail until your trial.
3. You have the right to have a lawyer.
4. A lawyer can be helpful to you by:
  - (A) explaining the charges in this paper;
  - (B) telling you the possible penalties;
  - (C) helping you at trial;
  - (D) helping you protect your constitutional rights; and
  - (E) helping you to get a fair penalty if convicted.
5. Even if you plan to plead guilty, a lawyer can be helpful.
6. If you want a lawyer but do not have the money to hire one, the Public Defender may provide a lawyer for you. The court clerk will tell you how to contact the Public Defender.
7. DO NOT WAIT UNTIL THE DATE OF YOUR TRIAL TO GET A LAWYER. If you do not have a lawyer before the trial date, you may have to go to trial without one.

Reverse Side of Copy #5  
"Defendant's Copy"  
Blue

**ENVELOPE (FRONT)**

Printing on front & back.

Print facing identification mark (FIM) and barcode per U.S. Postal Service specifications.

Stock Weight 24# Bond, White

FROM \_\_\_\_\_

PLACE  
STAMP  
HERE

PAYMENT ENCLOSED

REQUEST FOR WAIVER HEARING ENCLOSED

REQUEST FOR TRIAL ENCLOSED

DISTRICT COURT  
TRAFFIC PROCESSING CENTER  
P O BOX 6676  
ANNAPOLIS, MD 21401-0676

1. WRITE CITATION NUMBER ON CHECK
2. IF YOU HAVE RECEIVED MORE THAN ONE CITATION, PLEASE MAKE SURE YOU CORRECTLY LISTED ALL CITATION NUMBERS ON YOUR CHECK OR MONEY ORDER.
3. FOLD CHECK AND INSERT IN POCKET.
4. REMOVE TAPE.
5. FOLD FLAP UP AND OVER AND SEAL - AFFIX STAMP.
6. DO NOT SEND CASH.

TO INSURE PROPER CREDIT PLEASE USE THIS MAILING ENVELOPE:

**ENVELOPE (BACK)**

Printing on front & back.  
Print original barcode of  
citation number in center of  
envelope.  
Stock Weight 24# Bond,  
White