| MARYLAND UNIFORM COMPLAINT/CITATION/SUMMONS | | | | | 11145B6 | | | |
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| DRIVER'S | LICENSE N | IUMBER | | | • | CLA | SS STA | ATE |
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| CITY | | (| COUNTY | | | STATE | | ZIP |
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| VIOLATION | N DATE | | | | | BELTS H | | |
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FOR MORE INFORMATION AND TO PAY CITATIONS
Visit the MD Judiciary Website at 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

DR-49E (5/2011)

DISTRICT COURT OF MARYLAND SUMMONS TO APPEAR / NOTICE TO DEFENDANT IMPORTANT INFORMATION: This citation is a summons to appear. If you request a trial or waiver hearing, you will be notified by the Circuit or District Court through a trial/waiver hearing notice setting the date, time, and place to appear. It is your obligation to know your trial/hearing date and appear on that date. It may take several weeks before a trial/hearing date is set. 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 ANY OF YOUR VIOLATIONS ARE MARKED "MUST APPEAR": You will automatically be mailed a notice of your trial date by the Court. Failure to appear will result in a warrant for your arrest. Please read "Important Information". 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: You have the right to have a lawyer. 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. Even if you plan to plead guilty, a lawyer can be helpful. 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. If you want a lawyer but you cannot get one and the Public Defender will not provide one for you, confact the court clerk as soon as possible. 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. IF ANY OF YOUR VIOLATIONS ARE MARKED "PAYABLE FINE": You must comply with one of the following within 30 days after receipt of the citation. Provide any change of address if applicable. OPTION #1 - PAYMENT: Pay the full amount of the fine for each violation within 30 days at any District Court of Maryland, by mail, or by credit card (fees apply) using the IVR system or the Court Website. If paying by mail, make check or money order payable to District Court of MD and include citation number(s) on front of check or money order. On the option form below, check "Pay Fine Amount" for each violation being paid and mail the form with your payment to the address shown for the District Court of MD. An additional \$10 service fee will be imposed for each dishonored check. DEDION #2 - PEOLIEST A WARVER HEARING REGARDING SENTENCING AND DISPOSITION. OPTION #2 - REQUEST A WAIVER HEARING REGARDING SENTENCING AND DISPOSITION INSTEAD OF A TRIAL: On the option form below, check "Request Waiver Hearing" for each violation where hearing is requested, sign and date at bottom and mail the form within 30 days to the address shown below. DO NOT SEND PAYMENT at this time. OPTION #3 - REQUEST TRIAL: On the option form below, check "Request Trial" for each violation where Trial is requested, sign, date at bottom and mail the form within 30 days to the address shown below. DO NOT SEND PAYMENT at this time. DISTRICT COURT OF MARYLAND MD COMPLAINT AND CITATION OPTION FORM Return to: DISTRICT/NO. Popula District Court of MD P.O. Box 6676 Annapolis, MD 21401-0676 (Auto Populated) □ Check if change from address on citation ADDRESS CITY, STATE, ZIP TELEPHONE NO. CITATION NO YOU MUST APPEAR PAY FINE AMOUNT OR REQUEST WAIVER HEARING \$ 290 Auto Populated REQUEST WAIVER HEARING REQUEST TRIAL PAY FINE AMOUNT Auto Populated OR PAY FINE AMOUNT \$ 290 REQUEST WAIVER HEARING REQUEST TRIAL Auto Populated OR Check the appropriate box and sign below to request a Waiver Hearing or Trial for any citations listed above Request Waiver Hearing - I admit that I committed the violation(s) charged in this citation. I am requesting a waiver hearing at which I may explain the circumstances to a judge. I know this is

not a trial, the officer and witnesses will not be present, and my appearance is for sentencing

DEFENDANT'S SIGNATURE

Request Trial - I request a trial date for the violation(s) charged.

DATE

Citation Numbers