

AFFIDAVIT FOR PHOTO ENFORCEMENT VIOLATION NOTICE



STATE OF: _____ SS _____
(State you are in now) (City you are in now)

COUNTY OF: _____
(County you are in now)

AFFIDAVIT OF DEFENSES

Name: _____ Telephone No: () - _____
(Print Name as it appears on your Notice) (Include Area Code)

Address: _____ License Plate No: _____
(Street, and Appt. or Unit No.) (License Plate Number and State)

_____ Violation No: _____
(Address 2) (Appears at the bottom left hand corner of your Notice)

_____ Violation Date: _____
(City, State and Zip Code) (Appears on the face of the Notice below first paragraph)

E-Mail: _____ Officer Name: _____
(E-Mail Address) (Appears under the signature on the Notice of Violation)

(Affidavit must be notarized)

I, _____ (print or type name), being first duly sworn, hereby swear or affirm:

(Check as applicable)

- I hereby request a formal hearing before a local court or hearing officer. I understand that I must submit this request for the assigned local hearing officer within **60 days** from the date posted on the Notice of Violation (NOV). I understand that by filing a request for this hearing, I waive my ability to contest the delivery of the NOV as set forth in **F.S.S. 316.083 (c) and (d)**. I understand that I have the option to reschedule a hearing once by notifying the appropriate clerk of the court and/or the clerk for the local hearing officer in writing at least 5 calendar days prior to the scheduled hearing. I understand that if I do not reschedule my hearing and I fail to appear for this hearing that I will be adjudicated guilty and I am responsible for all fines and/or fees and that a vehicle registration stops will be placed on my record. I also understand that if the NOV is affirmed by the court and/or local hearing officer, that I am responsible for the payment of the original penalty plus up to **\$250.00** in local fees as set forth in **F.S.S. 316.083 (5)**.
- I was not the owner of the vehicle identified in the subject Notice of Violation on the date of the alleged violation.
- The above identified vehicle and/or license plates were stolen before the alleged violation occurred and neither was in my possession or control at such time. I have attached a *certified copy* of the police report related to this assertion.
- The driver of the vehicle during the alleged violation passed through the intersection when the light was red either (i) to yield the right-of-way to an emergency vehicle, or (ii) as part of a funeral procession.
- The driver of the vehicle during the alleged violation passed through the intersection when the light was red at the direction of a police officer acting within the scope of his duties.
- The driver of the vehicle during the alleged violation passed through the intersection when the light was red received a Uniform Traffic Citation for the same conduct issued by a police officer. I have attached a copy of the Uniform Traffic Citation to this Affidavit.
- The vehicle's owner was deceased on or before the date of the violation. **You must submit (I) a bill of sale or other document showing that the vehicle was sold after the death but before the violations, (II) proof that the license plate was returned after death but before the violation, or (III) a police report showing that the vehicle or plates were stolen after death, but before the date of the violation.**

Further Affiant sayeth not.

(Signature of Affiant)

(Print Name)

(Date)

Subscribed and Sworn before me this ____ day of

_____, _____

Signature of Notary Public

The vehicle identified in the Subject Notice of Violation was, at the time of the alleged violation, under the care custody and control of the following named individual:

Name: _____

Address: _____
(Street, and Appt. or Unit No.)

_____ (Address 2)

_____ (City, State, Zip.)

Birth Date.: _____ Sex.: _____
(Month) / (Day) / (Year) (Male or Female)

Drivers License No.: _____
(State) (DL Number)

Telephone No.: () - _____

** If all information is not provided, this Affidavit will be rejected*

*** If this section is completed, the named individual will receive a Notice of Violation and will have sixty (60) days to respond.*

Notary Stamp

Please mail the Affidavit and supporting documentation to:
City of Midway Police Department, 50 M.L. King Boulevard, Midway, FL 32343