



NO CONTEST PLEA

Use this form to make a written appearance and enter a plea of No Contest.

Complete all of the shaded areas of this form. If this form is incomplete or illegible, your entry of plea may be rejected.

1. Entering a plea of No Contest typically results in a conviction and a fine as a sanction.
2. Appearance Date/Time: Your appearance date/time can be found on your citation. You must either submit a plea of "No Contest" or "Not Guilty" by that date/time or appear in court on that scheduled date/time. Failing to do either will result in a default judgment against you.
3. Statement of Explanation: You may submit a written explanation to the Judge. The Judge may consider your explanation in determining Traffic Safety School eligibility and the amount of your fine. You may use the other side of this form for your written explanation. Plea forms without a written explanation may be adjudicated by the Violation Bureau Clerks under the authority of the Violations Bureau Order.
4. Response: If you are submitting his form by mail or by drop box, the Court will mail a response to you at the address you provide below. It is your responsibility to inform the Court of any change of your address. If you do not receive a response, it is your responsibility to contact the Court to determine the status of your case.
5. Payment: To submit your payment with your plea, the Court accepts Visa/MasterCard/Discover, cash, personal check, or money orders. Make checks payable to: City of Bend.
Please DO NOT leave cash or credit card information in the drop box.

Citation/Summons #	Description of Violation

I certify that I have chosen to appear in writing on the above citation(s), rather than appear in person before the Judge. I understand that I have the right to plead "Not Guilty" and have the matter set for trial. I hereby waive my right to trial and enter my plea of "No Contest" to the violation(s) above and agree to the penalties imposed by the Court. I have read and understood the instructions on this form.

Signature:	Today's Date:
Printed Name:	
Mailing Address:	City, State, Zip:
Driver's License:	Driver's License State:
Date of Birth:	Phone Number:
Email Address:	



Request for Consideration

I am pleading **No Contest** and wish to be considered for the following:

Fine Reduction

Fix-It Ticket Program

I swear OR attest:

_____ I did not have a Commercial Driver's License at the time the violation occurred

Distracted Driver Avoidance Course

I swear OR attest:

_____ This is my first cell phone violation.

Traffic Safety School Program

I swear OR attest:

_____ I did not have a Commercial Driver's License at the time the violation occurred.

_____ I have not had any traffic convictions for the past two years.

_____ I have not participated in a traffic safety program relating to a court case in the past two years.

OR

- I am pleading **No Contest** and **cannot** swear or affirm all the conditions above; however, I would like to write a letter of explanation to the judge.

Explanation:



Accommodation Information for People with Disabilities & Language Assistance Services

You can obtain this information in alternate formats such as Braille, electronic format, etc. Free language assistance services are also available. Please email accessibility@bendoregon.gov or call 541-693-2198. Relay Users Dial 7-1-1. All requests are subject to vendor processing times and should be submitted 48-72 hours in advance of events.

Servicios de asistencia lingüística e información sobre alojamiento para personas con discapacidad

Puede obtener esta información en formatos alternativos como Braille, formato electrónico, etc. También disponemos de servicios gratuitos de asistencia lingüística. Póngase en contacto en correo electrónico accessibility@bendoregon.gov o número de teléfono 541-693-2198. Los usuarios del servicio de retransmisión deben marcar el 7-1-1. Por favor, envíe sus solicitudes con 48-72 horas de antelación al evento; todas las solicitudes están sujetas a los tiempos de procesamiento del proveedor.