



The Colony Municipal Court
Deferred Disposition Request – FMFR (No Vehicle Insurance)

NAME (PLEASE PRINT): _____ CITATION#/DOCKET#: _____

ADDRESS: _____ APT#: _____

CITY: _____ STATE: _____ ZIP: _____ DL#: _____

PHONE#: _____ CELL#: _____ WORK# _____

EMAIL ADDRESS: _____ DATE OF BIRTH: _____

I hereby enter a plea of NO CONTEST to the violation of **Fail to Maintain Financial Responsibility** and waive my right to a jury trial. I request that the court allow me to complete a Deferred Disposition sentence for this case. I understand that if I successfully complete the terms of the Deferred Disposition in a timely manner, my case will be dismissed. If I do not successfully complete the terms of the Deferred Disposition, I will be sent a notice to appear in court to show cause why I did not complete the terms of this deferral. If cause is not sufficient, I understand that the Deferred Disposition will be revoked, a judgment of guilt entered, and the conviction will be reported to the Department of Public Safety and may appear on my driving record. I understand that the deferral period is 120 days from the date of my Deferred Disposition order and agree to the following terms:

1. Payment equal to the balance of the Deferred Disposition fee which totals \$400.00 (must be submitted at the time of the request or within 30 days of the request);
2. Payments can be submitted in person, by mail, or online. Payments must be cash, money order, cashier’s check, or credit/debit card. **PERSONAL CHECKS WILL NOT BE ACCEPTED;**
3. I will provide proof of a valid driver’s license (**A COPY MUST BE SENT WITH THIS REQUEST**);
4. I understand that any additional traffic violations received in the City of The Colony during the deferral period may be considered a violation of the terms of Deferred Disposition.
5. I will provide proof of valid vehicle liability insurance with this request and maintain coverage through
6. I will notify the court in writing of any change of name or address;

Defendant Signature

Date

This completed request can be submitted in person, by email, by mail, or in the overnight drop box located near the main entrance of the municipal court building. Please contact the court office at (972) 624-2200 or municipalcourt@thecolonytx.gov if you have any questions.