

STATE OF WASHINGTON OMAK MUNICIPAL COURT

David Ebenger, Judge

INFRACTION MITIGATION STATEMENT

Complete all information, date, sign and return to court. Must be **received** by the court within 15 days of the infraction or prior to your scheduled court date.

LASTNAME	FIRSTNAME	MIDDLE	TICKET NUMBER
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STATEMENT:

○ Additional Pages Attached

[illegible]

I wish to submit my case to the court in writing. I have read and agree to abide by the rules and procedures governing hearings by mail listed below.

I hereby state as follows:

I promise to pay the monetary penalty authorized by law or, at the discretion of the court, any reduced penalty that may be set.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

I understand that if this form is submitted by e-mail, my typed name on the signature line will qualify as my signature for purposes of the above certification.

Date and Place

Signature of Defendant

At the time of your request for a mitigation hearing or up until the scheduled hearing date, you have the option of a mitigation hearing by mail. If you decide to proceed with a hearing by mail, you will not be required to appear in court. **You must, however,** complete the Defendant's Statement Form and mail it to the court **prior** to your scheduled hearing. The court will review your statement and the police officer's sworn statement and render a decision. That decision will be mailed to you. In the case of a mitigation hearing, the infraction is found committed and a monetary penalty will be determined. In the case of a traffic infraction, **the finding will be reported to the Department of Licensing.** Any penalty will be based on the facts of the case and your driving record. You must agree to pay the court-ordered penalty within the specified time ordered by the judge. **You will be notified by mail in a form letter of the judge's decision.** There is **NO** right to appeal the judge's decision.

PLEASE COMPLETE YOUR MAILING ADDRESS AND CASE NUMBER ON THE NEXT PAGE

Omak Municipal Court, P.O. Box 72, Omak, WA 98841

Phone: 509-826-2971

STATE OF WASHINGTON OMAK MUNICIPAL COURT

David Ebenger, Judge

State of Washington, Omak Municipal Court
Vs.

Case Number: _____

Mitigation Hearing Findings and Order

Name _____

Mailing Address _____

City, ST Zip _____

DO NOT WRITE BELOW THIS LINE

☐ The Court has determined that the infraction was committed, and the penalty shall remain:
Count 1 \$ _____ Count 2 \$ _____ Count 3 \$ _____ FINE \$ _____

☐ The Court has determined that the infraction was committed, but the penalty shall be reduced to:
Count 1 \$ _____ Count 2 \$ _____ Count 3 \$ _____ FINE \$ _____

☐ The Court has deferred finding on this case for _____ months. If there are no further moving/non-moving traffic violations during the deferral period, the following infractions will be dismissed. Court fees are indicated below:
Count 1 \$ _____ Count 2 \$ _____ Count 3 \$ _____ COSTS \$ _____

☐ The Court has dismissed the following infractions:
☐ Count 1 ☐ Count 2 ☐ Count 3

☐ Count _____ The Court has determined that there was valid insurance at the time of the stop. The infraction will be dismissed upon payment of \$25.00 administrative fees. COSTS \$ _____

TOTAL FINES/COSTS \$ _____

☐ Other: _____

Dated: _____

☐ David Ebenger

☐ Pro Tem Judge

Please choose one of the following options:

☐ Payment in the amount of \$ _____ is to be **Paid in Full.**

☐ I wish to make a monthly payment plan. I understand there is a \$5.00 monthly fee. The Court uses Pay Assist to process monthly payments. Pay Assist 509-886-3752 or 800-410-8467 Pay on-line at: www.PayAssist.net or by mail POB 709 Wenatchee, WA 98807.

Contact Pay Assist on or before (DUE DATE _____)

***** REQUEST FOR TIME PAYMENTS MUST CONTACT PAY ASSIST BY THE DUE DATE LISTED ABOVE *****

Date: _____

Signature

****FAILURE TO PAY IN FULL OR SET UP PAYMENTS THROUGH PAY ASSIST BY DUE DATE MAY RESULT IN ADDITIONAL FEES AND SUSPENSION OF YOUR DRIVING PRIVILEGE ****