

THE STATE OF TEXAS

§

IN THE JUSTICE COURT

VS.

§

PRECINCT ONE

\_\_\_\_\_  
Defendant

§

ORANGE COUNTY, TEXAS

**Deferred Disposition Application**

You may qualify to have this charge dismissed by entering a plea of NO CONTEST or GUILTY and successfully completing the requirements of a Deferred Disposition. You must submit this form to the court before your appearance date and meet the qualifications below. Please read carefully and initial eligibility requirements.

(Initial) \_\_\_\_\_ I hereby waive my right to a jury trial and legal counsel. I have entered a plea of guilty or no contest. If I decide not to comply with the Deferred Disposition Order within the prescribed time, the total fine will be due and I will be convicted of the charge.

(Initial) \_\_\_\_\_ I hold a valid Texas driver’s license.

(Initial) \_\_\_\_\_ I have not completed an approved Deferred Disposition Order within the last 12 months of this citation date, nor am I currently signed up for Deferred Disposition for any other traffic citation.

(Initial) \_\_\_\_\_ I understand the offense did not occur in a construction zone with workers present.

(Initial) \_\_\_\_\_ I am not the holder of a Commercial Driver’s License.

(Initial) \_\_\_\_\_ I have proof of financial responsibility (vehicle insurance).

(Initial) \_\_\_\_\_ I understand that I will be required to complete a driving test with the Department of Public Safety if I have a “provisional” Driver’s License.

(Initial) \_\_\_\_\_ I was not going greater than 25 mph over the speed limit.

(Initial) \_\_\_\_\_ I was not charged with a speed of 95 miles per hour or more.

(Initial) \_\_\_\_\_ I did not leave the scene of an accident without exchanging information.

(Initial) \_\_\_\_\_ I did not fail to stop and render aid after injury accident.

(Initial) \_\_\_\_\_ I was not charged with passing a school bus loading/unloading children.

(Initial) \_\_\_\_\_ I understand a Driver’s Safety Course will be required if I am younger than 25.

(Initial) \_\_\_\_\_ I understand a Driver’s Safety Course will be required if there was an accident.

(Initial) \_\_\_\_\_ I understand the Driver’s Safety Course will charge a fee for the course.

(Initial) \_\_\_\_\_ I understand if I shall complete the IMPACT TEXAS DRIVERS COURSE (this is in addition to any driver’s safety course) for ages 16-17, 18-24, or Adult Drivers within 30 day at: <https://impacttexasdrivers.dps.texas.gov>

(Initial) \_\_\_\_\_ I understand I may be required to participate in an alcohol or drug abuse treatment or education program and provide certificate of completion from [www.courtsolutionsonline.com](http://www.courtsolutionsonline.com) to the court.

(Initial) \_\_\_\_\_ I understand that when I have completed the conditions of the Deferred Disposition and have returned proof thereof, the Court will dismiss the traffic citation and the violation will not appear on my driving record.

(Initial) \_\_\_\_\_ I understand I may be required to provide a Driving record from the Texas Department of Safety, <https://www.dps.texas.gov/DriverLicense/driverrecords.htm> Select Option 3A

(Initial) \_\_\_\_\_ I further understand my case will not be dismissed until the Court receives all documentation required in the order.

(Initial) \_\_\_\_\_ I understand upon failure to comply with the deferred disposition, will result in the fine and court cost, plus an added administrative fee to be set by the court not to exceed the amount of original fine must be paid in full. I will be required to appear in the court on the due date to show cause why I have failed to furnish proof of successful completion of an approved deferred disposition. In the event I fail to appear, then a **capias warrant** for my arrest will be issued. I understand that I will not receive any notice from the Court. I hereby acknowledge the receipt of a copy of the agreement and notice to appear and I understand and agree I will appear on or before the due date.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DATE

\_\_\_\_\_  
DEFENDANT (signature)

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DATE RECEIVED

\_\_\_\_\_  
JUSTICE COURT CLERK



Hershel Stagner, Jr.  
Justice of the Peace, Precinct One  
801 West Division Street  
Orange, Texas 77630  
Phone 409.882.7800 Fax 409.882.7001  
[JP1@co.orange.tx.us](mailto:JP1@co.orange.tx.us)

You have the right to plead **GUILTY, NO CONTEST**, or **NOT GUILTY** to this charge. A plea of **NO CONTEST** indicates that you are not contesting the charge(s) filed and you want to take care of the assessed fine and court costs. The fine and costs on a plea of **GUILTY** are the same as a plea of **NO CONTEST** and must be paid as ordered.

A plea of **NOT GUILTY** indicates that you wish to contest the charge(s) and that you are exercising your right to a trial. You may request a trial by Judge or by Jury. If you plead **NOT GUILTY** the law prohibits the judge from discussing any aspect of your case with you. A pre-trial hearing and/or a trial will be scheduled and you will be notified of this date. If found guilty at your trial, the fine and costs will be set by the Judge or Jury.

Since you will be notified by mail regarding your court dates, **you must furnish the court with a good address and phone number**. If any of this information should change, **it is your responsibility to notify the court of these changes**. Failure to appear at your court dates may result in additional charges being filed against you.

PLEA: (CHECK ONE)

- I enter a plea of **GUILTY** and waive appearance for trial.  
 I enter a plea of **NO CONTEST** and waive appearance for trial.  
 I enter a plea of **NOT GUILTY** and waive my right to a jury trial and request a trial by **Judge**.  
 I hereby enter a plea of **NOT GUILTY** and request a trial by **Jury**.

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ ST/DL#: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Email address: \_\_\_\_\_

Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

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If you qualify and you choose to take advantage of the Deferred Disposition option, please return with the following documents:

- Photocopy of your current auto liability policy.
- Photocopy of your valid Texas Driver's License. (Military exception: Active military, their spouses and dependents)
- Accident report, if required.
- Completed and signed Deferred Disposition Application. Return by mail, email or in person.

**Once our office receives and approves the Deferred Disposition application, you will be notified with details on how to proceed.**