PLEA / DISPOSITION FORM

City of Rye, NY Parking Violations

1051 Boston Post Rd

Rye, NY 10580

PHONE: (914) 967-7303

SUMMONS NUMBER
NAME
STREET
CITY, STATE, ZIP CODE

E-MAIL ADDRESS
HOME PHONE
WORK PHONE
FAX

Date:_____

To the Honorable Judge of the Rye City Court:

I wish to plead

❒Not Guilty ❒Guilty with an explanation ❒Guilty with a request for waiver of penalties and interest

to the above summons because:

_____

_____

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❒ I am not requesting a court date, and understand that I will be notified of the judgment when rendered

NOTE: After reviewing this disposition, the Judge may still require a court appearance
Notice: A false statement made herein is punishable under *Section 210.45* of the Penal Law as a Class A misdemeanor

_____

Signature of Summons Recipient

Complete this form and mail it in together with the summons. This information will be forwarded to the Court for its review and determination. You will be notified of the Court's judgment when rendered.

AUDIT CHECKLIST - TVB USE ONLY	
SUMMONS COPY	❒
GUILTY PLEA SCREEN	❒

AUDITED BY