TICKET / CAUSE # _____

STATE OF TEXAS
VS
_____

IN THE MUNICIPAL COURT
CITY OF VICTORIA
VICTORIA COUNTY, TEXAS

Mandatory Driver's Safety Course Application

You may be able to require that this charge be dismissed by entering a plea of no contest or guilty and successfully complete a Driver Safety Course (DSC). You will lose the right if, on or before your appearance date, you fail to provide the Court with notice of your request to take the course.

If you desire to complete a driver safety course under Article 45.0511 of the Code of Criminal Procedure, you must not have completed a driver safety course within the 12 months preceding the date of your citation; you must not be the holder of a commercial drivers license (CDL); you must not havee been charged with one of the following offenses: 95 miles per hour or more, speeding 25 miles per hour or more over the posted speed limit, passing a school bus, committing a serious traffic violation, failing to stop and provide information or render aid after an accident, or committing an offense in a construction zone when workers are present. **Please note: Juvenile cases cannot request DSC through mail. Must appear in court with a parent or guardian to request.**

You must provide the following to the court by your appearance date:

_____ a. A photocopy of your current auto liability policy
_____ b. A photocopy of your valid Texas Driver's License**
** (*MILITARY EXEMPTION: Active military, their spouses and dependents)*.
_____ c. A non-refundable check, money order, or cashier's check payable to the "City of Victoria" in the amount of:
Mandatory DSC Fees
$109.00 Moving Violation
$134.00 School Zone Moving Violation
_____ d. A photocopy of this completed and signed DSC application

The Court will review your application and supporting documents and the terms and conditions of the defensive driving will be mailed to you at the address you provide. Please complete and sign below.

I have read the Driver Safety Course instructions and I am eligible to take DSC. I hereby waive my right to a jury trial, discovery, and plead (check one box below):

☐ Guilty ☐ No Contest

_____
Citation Number

_____
Description of Violation

_____
Name Date of birth

_____
Telephone Number

_____
Address City State Zip Code

_____
Signature Date

All mail should be addressed to:
CITY OF VICTORIA MUNICIPAL COURT
P.O. BOX 1758 VICTORIA, TEXAS 77902