

Attachment One. Alabama Uniform Traffic Ticket and Complaint

FORM UTTC-1
REV 10/06

**ALABAMA UNIFORM TRAFFIC
TICKET AND COMPLAINT**

COURT CASE NO

YEAR NUMBER

ALABAMA, COUNTY OF				CO	CITY	TICKET NUMBER N
The undersigned, being duly sworn, deposes and says that he/she has probable cause to believe and does believe that the person herein named did, within the previous 12 months, commit the offense set forth contrary to law in that on or about _____ Month _____ Day _____ Year At _____ Time <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> MT Approx. _____ : _____						TYPE VEHICLE <input type="checkbox"/> Commercial <input type="checkbox"/> Haz-Mat Involved <input type="checkbox"/> Other _____ <input type="checkbox"/> Private
First Name		Middle/Maiden		Last		
Address Street						
City				State		Zip Code
State		Driver's License Number			Class of License	
Sex	Race	DOB	M	D	Y	Social Security Number
						Drivers License in Possession <input type="checkbox"/> Yes <input type="checkbox"/> No
Hgt.	Wgt.	Eyes	Hair	Vehicle Tag Number		State Year
Vehicle Description				Owner of Vehicle <input type="checkbox"/> Driver <input type="checkbox"/> Employer <input type="checkbox"/> Other		
Employer/Owner of Vehicle (Address)						
<input type="checkbox"/> Did unlawfully operate a motor vehicle, other vehicle, or <input type="checkbox"/> otherwise unlawfully use a public street, road, highway or other place, at or near _____, within the <input type="checkbox"/> city limits or <input type="checkbox"/> police jurisdiction of _____, or <input type="checkbox"/> within _____ County, at or near the following location _____ in violation of <input type="checkbox"/> Section _____ Code of Alabama 1975, <input type="checkbox"/> or Rule/Regulation number (or) <input type="checkbox"/> Municipal Ordinance No. _____ duly adopted and in force at the time the offense was committed, (if applicable) <input type="checkbox"/> adopting Section _____ Code 1975, more particularly described below:						
CHECK THE APPROPRIATE BLOCK:				UCR Code	KM No.	Street/Road Code
1. <input type="checkbox"/> Speeding _____ MPH _____ Speed Limit		7. <input type="checkbox"/> Driving While Revoked				
2. <input type="checkbox"/> Reckless Driving (Specify facts below)		8. <input type="checkbox"/> Driving While Suspended				
3. <input type="checkbox"/> Driving without First Obtaining a Driver's License		10. <input type="checkbox"/> Running Red Light				
DID DRIVE OR BE IN ACTUAL PHYSICAL CONTROL OF A VEHICLE WHILE:						
4. <input type="checkbox"/> There was 08% or More By Weight of Alcohol in His/Her Blood		13. <input type="checkbox"/> Improper Equipment (Specify) _____				
4. <input type="checkbox"/> Under the Influence of Alcohol		14. <input type="checkbox"/> Improper Passing				
5. <input type="checkbox"/> Under the Influence of Controlled Substance		28. <input type="checkbox"/> Improper Tag (Specify) _____				
71. <input type="checkbox"/> Under the Combined Influence of Alcohol and Controlled Substance		29. <input type="checkbox"/> Improper Turn				
72. <input type="checkbox"/> Under the Influence of any Substance which impairs the Mental or Physical Faculties		42. <input type="checkbox"/> Overweight Vehicle				
6. <input type="checkbox"/> Failure to Yield Right of Way		61. <input type="checkbox"/> Child Restraint Violation				
		77. <input type="checkbox"/> Seat Belt Violation				
<input type="checkbox"/> Other Violation (Specify) _____						
FACTS RELATING TO THE OFFENSE <input type="checkbox"/> Companion Case (Traffic, Non-Traffic, Felony, Other)				NAME		
(Witnesses, etc) <input type="checkbox"/> Accident involved						
Complainant's Signature				Officer ID.	Agency ORI	
Verified and Acknowledged before me this date (Circle Title) Judge/Magistrate				M	D	Y
<input type="checkbox"/> Municipal <input type="checkbox"/> District Court				COURT APPEARANCE INFORMATION		
				Phone ()		
Court Appearance Date		Time		Court Address		
M	D	Y	:	<input type="checkbox"/> AM <input type="checkbox"/> PM		
I promise to appear in court at said time and place or otherwise comply with the provisions of this complaint and instructions of the notice part of this ticket						
Defendant's Signature:				Phone ()		
<input type="checkbox"/> Released on Own Recognizance <input type="checkbox"/> Driver's License Posted in Lieu of Bond						

NAME
TICKET-N
CASE

COMPLAINT AND AFFIDAVIT

INSTRUCTION **PRESS FIRMLY**
TO OFFICER: ASK IF MOTORIST'S ADDRESS IS CORRECT ON DRIVER'S LICENSE

Court O.R.I. AL _____ J	COURT RECORD	COURT CASE NUMBER YEAR _____ NUMBER _____					
<input type="checkbox"/> MUNICIPAL COURT OR <input type="checkbox"/> DISTRICT COURT OF _____ COUNTY		TICKET NUMBER N					
DEFENDANT'S NAME _____		CHARGE _____					
CONTINUED TO	M D Y	REASON _____					
2ND CONTINUANCE	M D Y	REASON _____					
UTTC-6A MAILED	M D Y	NEW COURT DATE	M D Y	UTTC-6B ISSUED	M D Y	UTTC-6B CLEARANCE	M D Y
WARRANT ISSUED	M D Y	BOND SET \$	CASH	WARRANT SERVED	M D Y	WARRANT RECALLED	M D Y
CONDITIONAL BOND FORFEITURE ORDER ISSUED	M D Y	BOND FORFEITURE ORDER FINAL	M D Y		M D Y		M D Y
ATTORNEY FOR DEFENDANT	CHECK IF <input type="checkbox"/> Defendant informed of right to counsel <input type="checkbox"/> Voluntarily waived counsel <input type="checkbox"/> Defendant found indigent, counsel appointed						
PLEA OF DEFENDANT (CHECK ONE)							
1 <input type="checkbox"/> Guilty as charged 2 <input type="checkbox"/> Guilty of _____ 3 <input type="checkbox"/> Not guilty							
ADJUDICATION (CHECK ONE)							
3 <input type="checkbox"/> Guilty of _____ 1 <input type="checkbox"/> Guilty as charged 2 <input type="checkbox"/> Not guilty 4 <input type="checkbox"/> Nol prossed 5 <input type="checkbox"/> Dismissed							
ORDERS OF THE COURT							
FINE \$		COURT COSTS \$		TOTAL FINE AND COURT COSTS \$			
ADDITIONAL PENALTIES/FEEES/COSTS							
HEAD INJURY DUI \$		CRIMINAL HISTORY DUI \$ 10.00		CRIME VICTIMS (DUI/RECKLESS DRIVING) MISDEMEANOR (MINIMUM \$25.00)			
HOUSING & MAINTENANCE \$		MEDICAL \$		ATTORNEY RECOUPMENT \$		RESTITUTION \$	
PARTIAL PAYMENTS AUTHORIZED FOR \$							
<input type="checkbox"/> JAILED	M D Y	DAYS _____ RELEASED <input type="checkbox"/>		M D Y	LOCATION _____		
<input type="checkbox"/> SENTENCE SUSPENDED		<input type="checkbox"/> PROBATION		<input type="checkbox"/> COMMUNITY SERVICE			
Days _____ Months _____		Days _____ Months _____		Days _____ Months _____			
<input type="checkbox"/> TRAFFIC SAFETY PROGRAM		<input type="checkbox"/> SUBSTANCE ABUSE EVALUATION		<input type="checkbox"/> COURT REFERRAL PROGRAM COMPLETED			
M D Y		M D Y		M D Y			
COURT ORDERED LICENSE SUSPENSION _____ DAYS _____ MOS.				<input type="checkbox"/> CONSECUTIVE <input type="checkbox"/> CONCURRENT			
				LICENSE SURRENDERED TO COURT RECEIVED BY _____			
CONFIDENTIAL: <input type="checkbox"/> NO- <input type="checkbox"/> IF YES: <input type="checkbox"/> Juvenile <input type="checkbox"/> Youthful Offender							
DISPOSITION DATE		SIGNATURE OF JUDGE/MAGISTRATE					
M D Y							
CASE APPEALED		APPEAL BOND \$				CIRCUIT COURT CASE NUMBER	
M D Y							
ARRESTING AGENCY (TYPE OF ARREST) <input type="checkbox"/> STATE <input type="checkbox"/> COUNTY <input type="checkbox"/> MUNICIPAL							
CASH RECEIVED FROM		RECEIPT \$		AMOUNT \$		DATE M D Y	
NAME AND TITLE _____							
LICENSE ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO DPS RECEIVED LICENSE <input type="checkbox"/> YES <input type="checkbox"/> NO							

COURT ACTION AND DISPOSITION

**ALABAMA UNIFORM TRAFFIC
TICKET AND COMPLAINT**

ALABAMA, COUNTY OF		CO	CITY	TICKET NUMBER	N	
The undersigned, being duly sworn, deposes and says that he/she has probable cause to believe and does believe that the person herein named did, within the previous 12 months, commit the offense set forth contrary to law in that on or about _____ Month _____ Day _____ Year At _____ Time <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> MT Approx. _____ : _____				TYPE VEHICLE <input type="checkbox"/> Commercial <input type="checkbox"/> Haz-Mat Involved <input type="checkbox"/> Other _____ <input type="checkbox"/> Private		
First Name _____		Middle/Maiden _____		Last _____		
Address _____ Street _____						
City _____		State _____		Zip Code _____		
State _____		Driver's License Number _____			Class of License _____	
Sex	Race	DOB	M	D	Y	Social Security Number _____
						Drivers License in Possession <input type="checkbox"/> Yes <input type="checkbox"/> No
Hgt. _____	Wgt. _____	Eyes _____	Hair _____	Vehicle Tag Number _____		State _____ Year _____
Vehicle Description _____				Owner of Vehicle <input type="checkbox"/> Driver <input type="checkbox"/> Employer <input type="checkbox"/> Other _____		
Employer/Owner of Vehicle (Address) _____						
<input type="checkbox"/> Did unlawfully operate a motor vehicle, other vehicle, or <input type="checkbox"/> otherwise unlawfully use a public street, road, highway or other place, at or near _____, within the <input type="checkbox"/> city limits or <input type="checkbox"/> police jurisdiction of _____, or <input type="checkbox"/> within _____ County, at or near the following location _____ in violation of <input type="checkbox"/> Section _____ Code of Alabama 1975, <input type="checkbox"/> or Rule/Regulation number (or) <input type="checkbox"/> Municipal Ordinance No. _____ duly adopted and in force at the time the offense was committed, (if applicable) <input type="checkbox"/> adopting Section _____ Code 1975, more particularly described below:						
CHECK THE APPROPRIATE BLOCK:				UCR Code	KM No.	Street/Road Code
1. <input type="checkbox"/> Speeding _____ MPH _____ Speed Limit		2. <input type="checkbox"/> Reckless Driving (Specify facts below)		7. <input type="checkbox"/> Driving While Revoked		
3. <input type="checkbox"/> Driving without First Obtaining a Driver's License		4. <input type="checkbox"/> There was 08% or More By Weight of Alcohol in His/Her Blood		8. <input type="checkbox"/> Driving While Suspended		
4. <input type="checkbox"/> Under the Influence of Alcohol		5. <input type="checkbox"/> Under the Influence of Controlled Substance		10. <input type="checkbox"/> Running Red Light		
71. <input type="checkbox"/> Under the Combined Influence of Alcohol and Controlled Substance		72. <input type="checkbox"/> Under the Influence of any Substance which impairs the Mental or Physical Faculties		13. <input type="checkbox"/> Improper Equipment (Specify) _____		
6. <input type="checkbox"/> Failure to Yield Right of Way		<input type="checkbox"/> Other Violation (Specify) _____		14. <input type="checkbox"/> Improper Passing		
				28. <input type="checkbox"/> Improper Tag (Specify) _____		
				29. <input type="checkbox"/> Improper Turn		
				42. <input type="checkbox"/> Overweight Vehicle		
				61. <input type="checkbox"/> Child Restraint Violation		
				77. <input type="checkbox"/> Seat Belt Violation		
FACTS RELATING TO THE OFFENSE <input type="checkbox"/> Companion Case (Traffic, Non-Traffic, Felony, Other) (Witnesses, etc) <input type="checkbox"/> Accident involved						
Complainant's Signature _____				Officer ID. _____	Agency ORIAL _____	
Verified and Acknowledged before me this date (Circle Title) Judge/Magistrate				M	D	Y
<input type="checkbox"/> Municipal <input type="checkbox"/> District Court COURT APPEARANCE INFORMATION				Phone () _____		
Court Appearance Date <input type="checkbox"/>		Time		Court Address		
M	D	Y	:	<input type="checkbox"/> AM		
				<input type="checkbox"/> PM		
I promise to appear in court at said time and place or otherwise comply with the provisions of this complaint and instructions of the notice part of this ticket						
Defendant's Signature: _____				Phone () _____		
<input type="checkbox"/> Released on Own Recognizance <input type="checkbox"/> Driver's License Posted in Lieu of Bond						

NAME
TICKET-N
CASE

ABSTRACT OF COURT RECORD – DPS DATA INPUT

INSTRUCTION **PRESS FIRMLY**
TO OFFICER: ASK IF MOTORIST'S ADDRESS IS CORRECT ON DRIVER'S LICENSE

Court O.R.I. AL _____ J		ABSTRACT OF COURT RECORD		COURT CASE NUMBER	
				YEAR	NUMBER
<input type="checkbox"/> MUNICIPAL COURT OR <input type="checkbox"/> DISTRICT COURT OF COUNTY			TICKET NUMBER N		
DEFENDANT'S NAME			CHARGE		
CONTINUED TO		M	D	Y	REASON
2ND CONTINUANCE		M	D	Y	REASON
UTTC-6A MAILED		M	D	Y	
NEW COURT DATE		M	D	Y	
UTTC-6B ISSUED		M	D	Y	
UTTC-6B CLEARANCE		M	D	Y	
WARRANT ISSUED		M	D	Y	
BOND SET \$		CASH			
WARRANT SERVED		M	D	Y	
WARRANT RECALLED		M	D	Y	
CONDITIONAL BOND FORFEITURE ORDER ISSUED		M	D	Y	
BOND FORFEITURE ORDER FINAL		M	D	Y	
ATTORNEY FOR DEFENDANT			CHECK IF <input type="checkbox"/> Defendant informed of right to counsel <input type="checkbox"/> Voluntarily waived counsel		
			APPLICABLE <input type="checkbox"/> Defendant found indigent, counsel appointed		
PLEA OF DEFENDANT (CHECK ONE)					
1 <input type="checkbox"/> Guilty as charged		2 <input type="checkbox"/> Guilty of		3 <input type="checkbox"/> Not guilty	
ADJUDICATION (CHECK ONE)					
1 <input type="checkbox"/> Guilty as charged		2 <input type="checkbox"/> Not guilty		3 <input type="checkbox"/> Dismissed	
3 <input type="checkbox"/> Guilty of		4 <input type="checkbox"/> Not prosessed		5 <input type="checkbox"/> Dismissed	
ORDERS OF THE COURT					
FINE \$		COURT COSTS \$		TOTAL FINE AND COURT COSTS \$	
ADDITIONAL PENALTIES/FEEES/COSTS					
HEAD INJURY DUI \$		CRIMINAL HISTORY DUI \$ 10.00		CRIME VICTIMS (DUI/RECKLESS DRIVING) MISDEMEANOR (MINIMUM \$25.00)	
HOUSING & MAINTENANCE \$		MEDICAL \$		ATTORNEY RECOUPMENT \$	
				RESTITUTION \$	
				PARTIAL PAYMENTS AUTHORIZED FOR \$	
<input type="checkbox"/> JAILED		M	D	Y	LOCATION
		DAYS _____		RELEASED <input type="checkbox"/>	
<input type="checkbox"/> SENTENCE SUSPENDED		<input type="checkbox"/> PROBATION		<input type="checkbox"/> COMMUNITY SERVICE	
Days _____ Months _____		Days _____ Months _____		Days _____ Months _____	
<input type="checkbox"/> TRAFFIC SAFETY PROGRAM		M	D	Y	
		<input type="checkbox"/> SUBSTANCE ABUSE EVALUATION		<input type="checkbox"/> COURT REFERRAL PROGRAM COMPLETED	
COURT ORDERED LICENSE SUSPENSION			LICENSE SURRENDERED TO COURT		
_____ DAYS _____ MOS.			M		
			D		
			Y		
			RECEIVED BY		
CONFIDENTIAL: <input type="checkbox"/> NO- <input type="checkbox"/> IF YES: <input type="checkbox"/> Juvenile <input type="checkbox"/> Youthful Offender					
DISPOSITION DATE		SIGNATURE OF JUDGE/MAGISTRATE			
M	D	Y			
CASE APPEALED		APPEAL BOND \$		CIRCUIT COURT CASE NUMBER	
M	D	Y			
ARRESTING AGENCY (TYPE OF ARREST) <input type="checkbox"/> STATE <input type="checkbox"/> COUNTY <input type="checkbox"/> MUNICIPAL					
CASH RECEIVED FROM		RECEIPT \$		AMOUNT \$	
				DATE M	
				D	
				Y	
NAME AND TITLE					
LICENSE ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO DPS RECEIVED LICENSE <input type="checkbox"/> YES <input type="checkbox"/> NO					

COURT ACTION AND DISPOSITION – DPS DATA INPUT

**ALABAMA UNIFORM TRAFFIC
TICKET AND COMPLAINT**

ALABAMA, COUNTY OF		CO	CITY	TICKET NUMBER	N	
The undersigned, being duly sworn, deposes and says that he/she has probable cause to believe and does believe that the person herein named did, within the previous 12 months, commit the offense set forth contrary to law in that on or about				TYPE VEHICLE <input type="checkbox"/> Commercial <input type="checkbox"/> Haz-Mat Involved <input type="checkbox"/> Other _____ <input type="checkbox"/> Private	Month Day Year At Time <input type="checkbox"/> AM Approx. <input type="checkbox"/> PM <input type="checkbox"/> MT	
First Name		Middle/Maiden		Last		
Address Street						
City			State		Zip Code	
State		Driver's License Number			Class of License	
Sex	Race	DOB	M	D	Y	Social Security Number
					Drivers License in Possession <input type="checkbox"/> Yes <input type="checkbox"/> No	
Hgt.	Wgt.	Eyes	Hair	Vehicle Tag Number		State Year
Vehicle Description				Owner of Vehicle <input type="checkbox"/> Driver <input type="checkbox"/> Employer <input type="checkbox"/> Other		
Employer/Owner of Vehicle (Address)						
<input type="checkbox"/> Did unlawfully operate a motor vehicle, other vehicle, or <input type="checkbox"/> otherwise unlawfully use a public street, road, highway or other place, at or near _____, within the <input type="checkbox"/> city limits or <input type="checkbox"/> police jurisdiction of _____, or <input type="checkbox"/> within _____ County, at or near the following location _____ in violation of <input type="checkbox"/> Section _____ Code of Alabama 1975, <input type="checkbox"/> or Rule/Regulation number (or) <input type="checkbox"/> Municipal Ordinance No. _____ duly adopted and in force at the time the offense was committed, (if applicable) <input type="checkbox"/> adopting Section _____ Code 1975, more particularly described below:						
CHECK THE APPROPRIATE BLOCK:				UCR Code	KM No.	Street/Road Code
1. <input type="checkbox"/> Speeding _____ MPH _____ Speed Limit		7. <input type="checkbox"/> Driving While Revoked				
2. <input type="checkbox"/> Reckless Driving (Specify facts below)		8. <input type="checkbox"/> Driving While Suspended				
3. <input type="checkbox"/> Driving without First Obtaining a Driver's License		10. <input type="checkbox"/> Running Red Light				
DID DRIVE OR BE IN ACTUAL PHYSICAL CONTROL OF A VEHICLE WHILE:						
4. <input type="checkbox"/> There was 08% or More By Weight of Alcohol in His/Her Blood		13. <input type="checkbox"/> Improper Equipment (Specify) _____				
4. <input type="checkbox"/> Under the Influence of Alcohol		14. <input type="checkbox"/> Improper Passing				
5. <input type="checkbox"/> Under the Influence of Controlled Substance		28. <input type="checkbox"/> Improper Tag (Specify) _____				
71. <input type="checkbox"/> Under the Combined Influence of Alcohol and Controlled Substance		29. <input type="checkbox"/> Improper Turn				
72. <input type="checkbox"/> Under the Influence of any Substance which impairs the Mental or Physical Faculties		42. <input type="checkbox"/> Overweight Vehicle				
6. <input type="checkbox"/> Failure to Yield Right of Way		61. <input type="checkbox"/> Child Restraint Violation				
		77. <input type="checkbox"/> Seat Belt Violation				
<input type="checkbox"/> Other Violation (Specify) _____						
FACTS RELATING TO THE OFFENSE				<input type="checkbox"/> Companion Case (Traffic, Non-Traffic, Felony, Other)		
(Witnesses, etc)				<input type="checkbox"/> Accident involved		
Complainant's Signature			Officer ID.	Agency ORI AL		
Verified and Acknowledged before me this date (Circle Title) Judge/Magistrate				M	D	Y
<input type="checkbox"/> Municipal COURT APPEARANCE INFORMATION <input type="checkbox"/> District Court Phone ()						
Court Appearance Date		Time		Court Address		
M D Y		<input type="checkbox"/> AM <input type="checkbox"/> PM				
I promise to appear in court at said time and place or otherwise comply with the provisions of this complaint and instructions of the notice part of this ticket						
Defendant's Signature:				Phone ()		
<input type="checkbox"/> Released on Own Recognizance <input type="checkbox"/> Driver's License Posted in Lieu of Bond						

NAME

TICKET-N

CASE

POLICE RECORD

INSTRUCTION

PRESS FIRMLY

TO OFFICER:

ASK IF MOTORIST'S ADDRESS IS CORRECT ON DRIVER'S LICENSE

**ALABAMA UNIFORM TRAFFIC
TICKET AND COMPLAINT**

ALABAMA, COUNTY OF		CO	CITY	TICKET NUMBER	N	
The undersigned, being duly sworn, deposes and says that he/she has probable cause to believe and does believe that the person herein named did, within the previous 12 months, commit the offense set forth contrary to law in that on or about				At Time <input type="checkbox"/> AM Approx. <input type="checkbox"/> PM : <input type="checkbox"/> MT	TYPE VEHICLE <input type="checkbox"/> Commercial <input type="checkbox"/> Haz-Mat Involved <input type="checkbox"/> Other _____ <input type="checkbox"/> Private	
First Name		Middle/Maiden		Last		
Address Street						
City			State		Zip Code	
State		Driver's License Number			Class of License	
Sex	Race	DOB	M	D	Y	Social Security Number
				Drivers License in Possession <input type="checkbox"/> Yes <input type="checkbox"/> No		
Hgt.	Wgt.	Eyes	Hair	Vehicle Tag Number		State Year
Vehicle Description				Owner of Vehicle <input type="checkbox"/> Driver <input type="checkbox"/> Employer <input type="checkbox"/> Other		
Employer/Owner of Vehicle (Address)						
<input type="checkbox"/> Did unlawfully operate a motor vehicle, other vehicle, or <input type="checkbox"/> otherwise unlawfully use a public street, road, highway or other place, at or near _____, within the <input type="checkbox"/> city limits or <input type="checkbox"/> police jurisdiction of _____, or <input type="checkbox"/> within _____ County, at or near the following location _____ in violation of <input type="checkbox"/> Section _____ Code of Alabama 1975, <input type="checkbox"/> or Rule/Regulation number (or) <input type="checkbox"/> Municipal Ordinance No. _____ duly adopted and in force at the time the offense was committed, (if applicable) <input type="checkbox"/> adopting Section _____ Code 1975, more particularly described below:						
CHECK THE APPROPRIATE BLOCK:				UCR Code	KM No.	Street/Road Code
1. <input type="checkbox"/> Speeding _____ MPH _____ Speed Limit		2. <input type="checkbox"/> Reckless Driving (Specify facts below)		7. <input type="checkbox"/> Driving While Revoked		
3. <input type="checkbox"/> Driving without First Obtaining a Driver's License		4. <input type="checkbox"/> There was 08% or More By Weight of Alcohol in His/Her Blood		8. <input type="checkbox"/> Driving While Suspended		
5. <input type="checkbox"/> Under the Influence of Alcohol		5. <input type="checkbox"/> Under the Influence of Controlled Substance		10. <input type="checkbox"/> Running Red Light		
6. <input type="checkbox"/> Failure to Yield Right of Way		71. <input type="checkbox"/> Under the Combined Influence of Alcohol and Controlled Substance		13. <input type="checkbox"/> Improper Equipment (Specify) _____		
7. <input type="checkbox"/> Other Violation (Specify) _____		72. <input type="checkbox"/> Under the Influence of any Substance which impairs the Mental or Physical Faculties		14. <input type="checkbox"/> Improper Passing		
		77. <input type="checkbox"/> Seat Belt Violation		28. <input type="checkbox"/> Improper Tag (Specify) _____		
				29. <input type="checkbox"/> Improper Turn		
				42. <input type="checkbox"/> Overweight Vehicle		
				61. <input type="checkbox"/> Child Restraint Violation		
				77. <input type="checkbox"/> Seat Belt Violation		

FACTS RELATING TO THE OFFENSE <input type="checkbox"/> Companion Case (Traffic, Non-Traffic, Felony, Other) (Witnesses, etc) <input type="checkbox"/> Accident involved		NAME TICKET-N CASE
Complainant's Signature	Officer ID. Agency ORI AL	
Verified and Acknowledged before me this date (Circle Title) Judge/Magistrate		
<input type="checkbox"/> Municipal COURT APPEARANCE INFORMATION <input type="checkbox"/> District Court Phone ()		
Court Appearance Date	Time	Court Address
M D Y	: <input type="checkbox"/> AM <input type="checkbox"/> PM	
I promise to appear in court at said time and place or otherwise comply with the provisions of this complaint and instructions of the notice part of this ticket		
Defendant's Signature:		Phone ()
<input type="checkbox"/> Released on Own Recognizance <input type="checkbox"/> Driver's License Posted in Lieu of Bond		

DEFENDANT'S COPY

INSTRUCTION

PRESS FIRMLY

TO OFFICER:

ASK IF MOTORIST'S ADDRESS IS CORRECT ON DRIVER'S LICENSE

NOTICE

INSTRUCTIONS TO THE DEFENDANT

1. You must appear in court on the appearance date shown on the front of this ticket except as provided below.
2. If you have not settled this case prior to the appearance date and you do not appear in court on that date, a warrant will be issued for your arrest and the Department of Public Safety will be notified to suspend your driver's license.
3. You do not have to appear in court for the following offenses unless you have been convicted of, or plead guilty to, two or more traffic violations during the preceding 12 months (parking tickets excluded):

Speeding Allowing child under the age of 16 to operate motor vehicle Blocking highway Casting a light from a public road Coasting Crossing a fire hose Driving on wrong side of road Driving upon sidewalk Failure to dim headlights Failure to stop at railroad crossing Failure to use child restraint Failure to wear safety belt Failure to yield right-of-way Failure to yield to emergency vehicle Following emergency vehicle Following too closely Hitchhiking Littering highway No helmet (motorcycle rider) No permit (oversized width, height, length)	No red or orange flag or red light or amber strobe Obstructing driver's view Operating a motor vehicle without a driver's license Overweight/overheight/overlength truck Parking more than 18 inches from curb Refusal to weigh Running red light Running stop sign Shifting load Spilling load Stopping on highway Switched personalized license plates Unattended motor vehicle Violating driver's license restriction or endorsement	IMPROPER: Backing Brakes Lights Muffler Or no rearview mirror Passing Signal Stopping or parking on or in highway Stopping, standing, or parking in specified places Stopping, standing, or parking outside business or residence Tag Tag classification Tires Turn Use of clearly indicated divided highway Window tinting
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Other minor traffic offenses may be added to this list which will allow you to plead guilty before a magistrate. You may contact the court shown on the reverse side of the ticket to determine if the offense with which you are charged is included. If you are charged with one of the above offenses and have not been convicted of two or more traffic violations during the preceding 12 months, you may enter a plea of guilty either in person or by mail to the court clerk or magistrate not later than 24 hours before the court date shown on the ticket. To do so, you must sign the "Plea of Guilty/Waiver of Rights" set forth below and present this copy of the ticket and pay all fines and court costs.

4. You must contact the court for the amount of the fine and court costs.
5. Penalty points are assessed upon conviction under the provisions of Alabama statutes and the Alabama Department of Public Safety's Point System and may result in the suspension or revocation of your driver's license by the Department of Public Safety.

PAYMENT MUST BE BY CERTIFIED CHECK OR MONEY ORDER IF MADE BY MAIL

PLEA OF GUILTY/WAIVER OF RIGHTS
YOU ARE HEREBY ADVISED OF YOUR RIGHTS AS A DEFENDANT IN THIS TRAFFIC CASE
(Please Read Carefully)

I, the undersigned, do hereby enter my appearance on the offense charged within this complaint. I understand that I have certain constitutional rights which I will waive if I plead guilty, namely: the right to a trial before this court; the right to an attorney of my choice, or if I cannot afford one, one appointed by the court; the right at trial to subpoena witnesses on my behalf, to confront and cross-examine witnesses against me and to argue and make objections; and the right to testify in my own behalf. I also understand that I cannot be forced to testify against myself and that I am presumed innocent and that this presumption can be overcome only if the prosecution convinces the judge or jury of my guilt beyond a reasonable doubt.

I understand my constitutional rights set out above and the punishment that will be imposed if I elect to plead guilty before a magistrate. I also understand that my plea of guilty will have the same force and effect as a judgment of conviction by the court and that a record of this conviction will be sent to the driver's license division of the Alabama Department of Public Safety (or of the state where I received my license to drive). This may result in the suspension or revocation of my driver's license and may adversely affect my ability to maintain or secure automobile insurance. I further understand that this conviction may result in enhanced penalties on subsequent convictions. I understand my rights and the matters set out above and hereby **voluntarily and knowingly** waive such rights by pleading guilty as evidenced by my signature below. I further state under penalty of law (Section 13A-10-109, Code of Alabama 1975), that I have not been convicted of two or more traffic violations during the preceding 12 months.

 Defendant's Signature Date

 Defendant's Name (print or type)

6. For minor Equipment Violations: Local municipal ordinances may allow you to have the equipment repaired within 72 hours, excluding Sundays and legal holidays, and present your ticket to any law enforcement officer within the jurisdiction of the offense charged. This officer after inspection of your vehicle may, by signing below, recommend that the charge be dismissed. You must then deliver or forward the ticket to the court clerk at the address on the front of this ticket.

DEFECTIVE EQUIPMENT REPAIRED (OFFICER'S RECOMMENDATION TO DISMISS CHARGE)

Equipment Inspected			Inspecting Officer's Name, PRINTED AND SIGNED:		
Date of Inspection	Time	Officer ID	Agency O.R.I. Number		
Mo: Day: Year:	: <input type="checkbox"/> AM : <input type="checkbox"/> PM		AL		

ALABAMA UNIFORM TRAFFIC TICKET AND COMPLAINT

INSTRUCTION TO OFFICERS

PRINT EVERYTHING BUT SIGNATURES,
USE A MEDIUM BALL POINT PEN AND PRESS FIRMLY.
PRINTING ON TICKET MUST BE LEGIBLE ON ALL COPIES.
(CHECK VIOLATOR'S COPY BEFORE ISSUING).

1. This Uniform Traffic Ticket and Complaint (UTTC) MAY NOT be issued to charge municipal parking offenses, Rule 19(B), Ala.R.Jud.Admin.
2. Use a separate UTTC for each violation.
3. Complete and sign the UTTC, have the motorist sign the promise to appear in court, and give him/her the defendant's copy.
4. Advise the motorist to follow the instructions on the back of the UTTC. Inform him/her of the consequences of failing to appear in court.
5. All copies of a voided ticket must be returned to the local issuing office.
6. This ticket, including the statement of charges, is valid until specifically recalled pursuant to Rule 19(D), Ala.R.Jud.Admin.
7. A commercial motor vehicle is a motor vehicle designed or used to transport passengers or property and: (a.) having gross weight of 26,001 lbs or more; or (b.) designed to transport 16 or more passengers; or (c.) transporting hazardous material pursuant to Title 32-6-49.3.

STATE CODES

AL	Alabama	LA	Louisiana	OR	Oregon
AK	Alaska	ME	Maine	PA	Pennsylvania
AZ	Arizona	MD	Maryland	RI	Rhode Island
AR	Arkansas	MA	Massachusetts	SC	South Carolina
CA	California	MI	Michigan	SD	South Dakota
CO	Colorado	MN	Minnesota	TN	Tennessee
CT	Connecticut	MS	Mississippi	TX	Texas
DE	Delaware	MO	Missouri	UT	Utah
DC	District of Columbia	MT	Montana	VT	Vermont
FL	Florida	NE	Nebraska	VA	Virginia
GA	Georgia	NV	Nevada	WA	Washington
HI	Hawaii	NH	New Hampshire	WV	West Virginia
ID	Idaho	NJ	New Jersey	WI	Wisconsin
IL	Illinois	NM	New Mexico	WY	Wyoming
IN	Indiana	NY	New York	AS	American Samoa
IA	Iowa	NC	North Carolina	CZ	Panama Canal Zone
KS	Kansas	ND	North Dakota	GU	Guam
KY	Kentucky	OH	Ohio	PR	Puerto Rico
		OK	Oklahoma	VI	Virgin Islands

A Certified copy of the Uniform Traffic Ticket and Complaint Form (UTTC) may be used in lieu of the Uniform Crime Report (UCR) for reporting to the ACJIC for the DUI cause ONLY. The UCR Code for reporting DUI/Liquor arrests is 5404; for DUI/Drugs is 5403. This code should be included in the space provided on all DUI tickets.

ALABAMA UNIFORM TRAFFIC TICKET & COMPLAINT

Beginning Ticket ➤ **N**

Beginning Ticket ➤ **N**

Date Issued _____

Issuing Officer _____

Received By: _____ Name _____ ID NO: _____

AGENCY COPY

CODE	CHARGE	STATUTE
01	Speeding	
	- Posted	32-5A-171
	- Reasonable/Prudent	32-5A-170
02	Reckless Driving	32-5A-190
03	Driving W/O License	32-6-18
04	DUI	
	- BAC	32-5A-191(a)(1)
	- Under the Influence	32-5A-191(a)(2)
05	- Controlled Substances	32-5A-191(a)(3)
71	- Combined Alcohol & Controlled Substances	32-5A-191(a)(4)
72	- Any Substance	32-5A-191(a)(5)
	- Under 21, BAC .02-.08	32-5A-191(b)
06	Failing to Yield R.O.W.	
	- Intersection	32-5A-110
	- Left Turn	32-5A-111
	- Stop or Yield Intersection	32-5A-112
	- Private or Other Roadway	32-5A-114
	- Emergency Vehicle	32-5A-115
	- Construction	32-5A-116
	Driving While License	
07	- Revoked	32-6-19
08	- Suspended	32-6-19
09	- Canceled	32-6-19
10	Running Red Light	32-5A-31
11	Driving on Wrong Side of Road	32-5A-80
12	Running Stop Sign	32-5A-31
13	Improper	
	- Muffler	32-5-216
	- Lights	32-5-240
	- Tires	32-5-210
	- Mirror	32-5-214
	- Brakes	32-5-212
14	Improper Passing	
	- Opposite Direction	32-5A-81
	- Same Direction (left)	32-5A-82
	- Same Direction (right)	32-5A-83
	- No Passing	32-5A-86
28	Improper Tag – Classification	32-6-52
	Wrongful Use of Specialized Tag	32-6-131
	Wrongful Use of Personalized Tag	32-6-155
29	Improper Turn	
	- Left	32-5A-111
	- Intersection	32-5A-130
	- Curve or Crest of Grade	32-5A-131
	- Turning Movement	32-5A-133
42	Overweight Vehicle	32-9-20

State of Alabama Unified Judicial System Form UTTC-7 Rev. 8/97	PLEA OF GUILTY/WAIVER OF RIGHTS (Plea Entered Before Magistrate Scheduled Traffic Offenses)	Case Number UTTC Number
<input type="checkbox"/> In the District Court of _____, Alabama <div style="text-align: center;">(Name of County)</div> <input type="checkbox"/> In the Municipal Court of _____, Alabama THE STATE OF ALABAMA or CITY/TOWN OF : _____ v. _____ <div style="text-align: right;">Defendant</div>		
<p style="text-align: center;">NOTICE TO THE ABOVE NAMED DEFENDANT:</p> <p>State law prohibits magistrates from receiving pleas of guilty from anyone convicted of two or more traffic offense in the preceding 12 months. If you have been convicted of two or more traffic offenses within the preceding 12 months, do not sign this plea of guilty. A false statement will subject you to penalties prescribed by law.</p> <p>You are charged with the offense of _____. In accordance with the Rules of Judicial Administration, you may elect to plead guilty to this offense before a magistrate and pay a fine of \$ _____ plus court costs of \$ _____, for a total of \$ _____.</p>		
<p style="text-align: center;">PLEA OF GUILTY – WAIVER OF RIGHTS</p> <p style="text-align: center;">YOU ARE HEREBY ADVISED OF YOUR RIGHTS AS A DEFENDANT IN THIS TRAFFIC CASE.</p> <p style="text-align: center;">Please Read Carefully</p> <p>I, the undersigned, do hereby enter my appearance on the offense charged within this complaint, I understand that I have certain constitutional rights which I will waive if I plead guilty, namely: the right to a trial before this court; the right to an attorney of my choice, or if I cannot afford one, one appointed by the court (however, I understand that I may be ordered to make reimbursement at a later date); the right at trial to subpoena witnesses on my behalf, to confront and cross-examine witnesses against me and to argue and make objections; and the right to testify in my own behalf. I also understand that I cannot be forced to testify against my self and that I am presumed innocent and that this presumption can be overcome only if the prosecution convinces the judge or jury of my guilt beyond a reasonable doubt.</p> <p>I understand my constitutional rights set out above and the punishment that will be imposed if I elect to plead guilty before a magistrate. I also understand that my plea of guilty will have the same force and effect as a judgment of conviction by the court and that a record of this conviction will be sent to the driver license division of the Alabama Department of Public Safety (or of the state where I received my license to drive). This may result in the suspension or revocation of my driver's license and may adversely affect my ability to maintain or secure automobile in insurance. I further understand that this conviction may result in enhanced penalties on subsequent convictions. I understand my rights and the matters set out above and here <u>voluntarily</u> and <u>knowingly</u> waive such rights by pleading guilty as evidenced by my signature below. I further state under penalty of law (Section 13A-10-109, <i>Code of Alabama</i> 1975), that I have not been convicted of two or more traffic violations during the preceding twelve months.</p> <div style="text-align: right; margin-top: 20px;"> _____ Defendant's Signature Date </div> <div style="text-align: center; margin-top: 10px;"> _____ Defendant's Name (print or type) </div>		