

DOCKET NUMBER: _____

STATE OF TEXAS
VS.

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IN THE MUNICIPAL COURT
CITY OF CEDAR PARK
WILLIAMSON COUNTY, TEXAS

**PARKING IN A HANDICAP LANE
MOTION FOR DISMISSAL & AFFIDAVIT**

I, _____, file this request for dismissal for the reason stated below. I request the State and the Court to dismiss this case.

- I WAS NOT CITED for Parking in a Handicap Lane in the vehicle with license plate number _____ on _____(date), however I am the Responsible Party (*see definition of 'responsible party' below*). **You must complete the Responsible Party information below. If you hold a valid disabled parking placard, please attach a copy of both the placard and your driver's license.**
- I WAS CITED for Parking in a Handicap Lane in the vehicle with license plate number _____ on _____(date). I do not hold a disabled parking placard, however another passenger of this vehicle (the Responsible Party) did hold a valid disabled parking placard. **The Responsible Party must complete the affidavit below and provide a copy of their placard and driver's license.**
- Vehicle was sold prior to violation. The new owner information is listed in the Responsible Party section below. **Please attach a bill of sale or Texas DMV title transfer notice.**

RESPONSIBLE PARTY AFFIDAVIT (must be completed and signed by the Responsible Party)

("Responsible Party" means the person who either parked the vehicle in the handicap space, or was a passenger in the vehicle that parked in the handicap space, and is claiming responsibility for the violation).

I understand that providing false information is a violation of the law and could lead to criminal prosecution and additional charges against me. I understand that it is my responsibility to notify the Texas Department of Motor Vehicles if I am no longer the owner of the vehicle. By my signature below, I affirm the information provided in this affidavit is true and correct.

Responsible Party's Full Name: _____

Address: _____ City/State/Zip: _____

Email Address: _____ Phone #: _____

Responsible Party Signature

SWORN TO AND SUBSCRIBED before me on this _____ day of _____, 20_____.

Court Clerk/Notary Public