AFFIDAVIT, PLEA, MOTION TO DISMISS AND ORDER ON DEFENDANTöS MOTION TO DISMISS

(Disabled Driver)

IN THE COUNTY COURT OF THE FIFTEENTH JUDICIAL CIRCUIT IN AND FOR PALM BEACH COUNTY, FLORIDA

TRAFFIC DIVISION

CASE NO. _____

CITATION NO. _____

DATE ISSUED: _____

STATE OF FLORIDA,

VS.

PRINT

NAME _____,

PRINT

STREET ADDRESS _____

PRINT

CITY, STATE, ZIP _____

DEFENDANT.

I received the above-referenced citation charging me with violation of a handicapped parking ordinance or law.

I was the driver of the vehicle at the time of the citation. I plead not guilty to the charge and ask that the citation be dismissed.

At the time of the alleged violation I had a valid disabled person parking permit which was issued to me on

_____ and **expires on** _____ and therefore was **valid at the time the citation was issued.**

I understand this Affidavit will be presented to the Court to support my Motion To Dismiss.

Copies of my valid driver's license (front and back), disabled person parking permit registration, vehicle registration, and the above-referenced citation are attached.

(Signature) _____

State of Florida

County of Palm Beach

Sworn to and subscribed before me this____ day of _____, 20__ by _____who is personally known to me or who has produced _____ as identification and who did / did not take an oath.

(Signature of person taking acknowledgment) _____ *(Seal)*

(Name of Officer taking acknowledgment) _____

*(Title or rank)*_____ *(Serial number, if any)* _____

ORDER ON DEFENDANTöS MOTION TO DISMISS

_____**THIS MATTER came before the Court in Chambers on Defendantös Verified Motion To Dismiss, and the Court having reviewed Defendantös Motion together with copies of Defendantös valid driverös license and /or disabled person parking permit and/or vehicle registration, and being otherwise fully advised in the premises, it is**

ORDERED AND ADJUDGED that Defendantös Motion To Dismiss is hereby GRANTED /DENIED._____

_____

DONE AND ORDERED at Palm Beach County Florida, on the _____ day of _____, 20____

_____

COUNTY COURT JUDGE/HEARING OFFICER

Copy furnished: Defendant