

Name, address and telephone number of attorney or party without attorney:	FOR COURT USE ONLY
Telephone No.: _____ Fax No.: _____	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SUTTER STREET ADDRESS: 1175 Civic Center Boulevard MAILING ADDRESS: 1175 Civic Center Boulevard CITY AND ZIP CODE: Yuba City, CA 95993 BRANCH NAME:	
PEOPLE OF THE STATE OF CALIFORNIA vs. DEFENDANT:	
APPLICATION & DECLARATION FOR COMMUNITY SERVICE OR REQUEST FOR HEARING ON ABILITY TO PAY TRAFFIC FINE	CASE NUMBER: _____

- I have previously been convicted of a traffic infraction. Payment of the total fine would pose a financial hardship on me. (check one option below)
- I request the court allow me to complete community service in lieu of payment of the total fine.
- I request the court consider my ability to pay the total fine and reduce it accordingly.
- I hereby enter a plea of guilty or no contest (check one.) I have read and understand the STATEMENT OF RIGHTS AND ADVISEMENTS and have included the signed original with this application. By signing the STATEMENT OF RIGHTS AND ADVISEMENTS, I acknowledge the advisements and waive all rights included therein. Payment of the total fine would pose a financial hardship on me. (check one option below)
- I request the court allow me to complete community service in lieu of payment of the total fine.
- I request the court consider my ability to pay the total fine and reduce it accordingly.

Below is the reason why payment of the total fine would pose a financial hardship on me and my family:

Check here and attach a sheet of paper if you need more space

My Declaration of Financial Circumstances for Community Service or Ability to Pay Traffic Fine is attached (the Court will not consider your request without a completed Financial Declaration).

I declare, under penalty of perjury, under the laws of the State of California that the foregoing information is true and correct.

Dated: _____ (TYPE OR PRINT NAME) _____ (SIGNATURE)

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1. The request for community service is: Granted (see "a" below) Denied Set for a hearing (see "3" below)
 - a. Complete up to _____ hour(s) of community service in lieu of all or a portion of the total fine (\$24 for each hour of community service will be applied toward fine.) Proof of completion of community service hours and/or payment of fine balance must be provided by: _____. If proof of completion of community service is not received by this date any outstanding balance of the fine becomes due. Failure to complete community service or pay remaining balance of fine by the due date will result in additional assessments.
2. The request for reduction of the total fine is: Granted (see "a" below) Denied Set for a hearing (see "3" below)
 - a. The total fine has been reduced to \$_____, based upon ability to pay. This amount is due by _____. Failure to pay this amount by the due date will result in additional assessments

3. The request is set for hearing as follows:

Hearing Date: _____	Time: _____	Location: 1175 Civic Center Blvd, Yuba City, CA 95993 Courtroom: TBD
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Date: _____ Judge of the Superior Court