

City of Austin Municipal Court

<u>Address:</u> 700 E. 7th St., Austin, TX 78701 <u>Mail:</u> P.O. Box 2135, Austin, TX 78768 <u>Phone:</u> (512) 974-4800; <u>Fax:</u> (512) 974-4882



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CAMERA RED LIGHT NON-LIABILITY AFFIDAVIT

Complete this affidavit fully. This affidavit must be notarized. Any information or proof not provided by the respond date on your citation will make this affidavit null and void. Citation Number: _____ _____, was not the driver of the vehicle with license plate number _____ on the date(s) of ______ when the vehicle was cited for running a red light(s). (Please Check One) ____ Vehicle or license plates were **STOLEN** prior to violation. **Attach police report.** Vehicle was **SOLD** prior to violation. Provide new owner information in the responsible party section below. **Attach** supporting documents such as a Texas DMV transfer notice or statement from the Tax Assessor's office verifying the transfer of sale. OR _____ Vehicle was a **RENTAL**. The renter information is listed in responsible party section below. **Attach rental** agreement. OR _ Vehicle was being **DRIVEN BY ANOTHER PERSON**. Provide the driver information in the responsible party section below. Responsible Party's Full Name (please print): \Rightarrow \Rightarrow 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. I further understand that this is my only opportunity to name another person responsible for the violation. If the above named individual is found not to be the operator at the time of the violation, then I will be held liable for the violation. By my signature below, I affirm the information provided in this affidavit is true and correct. Signature: _____ Printed Name: Complete Address: Email Address: _____ Telephone Number: ____

Note: If mailed, this affidavit must be notarized.

Notary in and for the State of Texas

My Commission Expires _____

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

OR

The City of Austin is committed to compliance with the American with Disabilities Act. Reasonable modifications and equal access to communications will be provided upon request.

Deputy Court Clerk

Austin Municipal Court, Austin, Texas