

City of Austin Municipal Court Address: 6800 Burleson Rd., Bldg 310, Ste 175, Austin, TX 78744 Mail: P.O. Box 2135, Austin, TX 78768

Phone: (512) 974-4800; Fax: (512) 974-4882 $\underline{\textit{Email}} : \underline{\textit{court@austintexas.gov}}; \underline{\textit{Internet}} : \underline{\textit{www.austintexas.gov/court}}$



Attorney Appearance Docket Waiver

Case Number	er(s):	
Appearance Docket Waiver (Note: Th	nis form can only	y be used for an Appearance Docket)
The State of Texas	§	In the Municipal Court
	§	
VS	§	City of Austin
	§	
	§	
Attorney of Record,		, for the above
referenced case(s), requests to waive the Atto		
		JUDGE or JURY (select one).
By requesting a trial by Judge, the right to a	JURY trial is wa	aived.
, ,	understood that	I am waiving my client's right to atrial
by JURY. Initials		
Sionati	ure:	
Digitati		y of Record

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.