

**City of Austin Municipal Court**  
**Deferred Disposition Request**  
**Criminal (Disabled) Parking Violation**

Cause or Citation Number: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Name (Please print): \_\_\_\_\_

\_\_\_\_\_ Address is correct as shown in case file; OR

\_\_\_\_\_ Address: \_\_\_\_\_  
(Please print)

\_\_\_\_\_

I hereby enter a plea of “no contest” to the violation of \_\_\_\_\_ and waive my right to a jury trial. I request that the Court allow me to complete a Deferred Disposition sentence for this case. I understand that if I successfully complete the terms of the Deferred Disposition in a timely manner, my case will be dismissed. If I do not successfully complete the terms of the Deferred Disposition, I will be sent a notice to appear in court to show cause why I did not complete the terms of this deferral. If cause is not sufficient, I understand that the Deferred Disposition will be revoked and a judgment of guilt entered.

I understand this Deferred Disposition is not available if I possess a Provisional driver’s license. I understand that the deferral period is **90 days** from the date this form is postmarked and agree to the terms of this Deferred Disposition, which are:

1. Payment must be made immediately in the amount of \$250; you cannot pay online but must attach a check or money order; contact the court if you cannot pay immediately; **and**
2. Commit no disabled parking offenses within the City limits of Austin, Texas; **and**
3. Notify the Court in writing of any change of address.

\_\_\_\_\_  
Defendant Signature

\_\_\_\_\_  
Date Signed