TRAFFIC VIOLATIONS AGENCY - MOTION TO VACATE DEFAULT CONVICTION

MOTION TO VACATE DEFAULT CONVICTION (CORAM NOBIS)

Only use this form if you have been <u>convicted by default</u> of a violation, which means that you failed to appear at your scheduled trial. You must provide a valid reason to reopen your case pursuant to CPL Article 440. **Do not use** this form if you were convicted at a trial or pleaded guilty to this ticket.

A NON-REFUNDABLE \$75 ADMINISTRATIVE FEE IS REQUIRED TO FILE THIS DOCUMENT (Cash, Money Order, or Bank Check only)

Instructions:

- Answer every question in the spaces provided. Completely fill out this form.
- 2. You must use a separate motion for each case number.
- If your motion was previously denied, do not submit another application to reopen the default conviction.
- 4. You must attach copies of any relevant documents to support your grounds.
- 5. Sign and date the application.

I [print your name]

Failure to sign and complete ALL sections of this form may result in the denial of your application

Submit your Motion and supporting documents by mail or in person to:

Judicial Hearing Officer
Rochester Traffic Violations Agency
200 E. Main Street, Suite B-002
Rochester, NY 14604

	r internal use only te filed:
0	SEi case notes
	JHO Only:
Da	te Heard:
	Grant
	Denied
No	ites:
HL	O Signature:
UT	-20 Req'd? Y / N

Contact Info	rmation About the Person Com	pleting this	form		
Name:					
Mailing Address:	City:	State:	Zip Code:		
Telephone Number:	Email Address:				
In	formation about the Case /				
Case number (only one number per for	rm):				
	nal Court Date: Have you previously filed a motion to vacate for this case?				
How did the motorist learn about this	default conviction?				
	Why You Failed to Appear				
Explain in detail the grounds for your N	Motion (Criminal Procedure Law Article 440). A	ttach any and all	supporting documents.		
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AUTHORIZED TO COMPLETE AND SUBMIT THIS REQUEST, (B) I HAVE NOT PREVIOUSLY SUBMITTED A "MOTION TO VACATE DEFAULT CONVICTION" FOR THIS VIOLATION(S), AND (C) THAT TO THE BEST OF MY KNOWLEDGE, ALL

INFORMATION I INCLUDED ON THIS FORM AND IN THE ATTACHMENTS IS TRUE.	
YOUR SIGNATURE:	DATE:

, CERTIFY UNDER PENALTY OF PERJURY THAT (A) I AM