DSC Request Form

Citation #				
I hereby waive my right to a jury trial, DRIVER'S SAFETY COURSE OPTION IN	•		NO CONTEST) & requ	est to take a
1DSC FEE OF: \$144.00 - OR - \$16 payable to: City of Terrell Hills 2 PROOF OF VALID INSURANCE 3 COPY OF VALID TX DRIVER LIC accepted). I understand that these co requirements within 90 days the bala	59.00 IF IN A SCHOOI ENSE (a valid Militanests are in addition to	ry ID and valid out o	of state Driver License urse and if I do not cor	will also be mplete all the
DO NOT PROCEED TO TAKE THE COUCOURT.	RSE UNTIL AFTER YO	DU RECEIVE A DSC I	NSTRUCTION SHEET I	FROM THE
CERTIFY BY: CHECKING or INITALING I I have a valid NON COMMERCIAL				nse or permit)or
copy of an active Military ID, Affidavit I am not in the process of taking s I have not completed a course unviolation I have enclosed a copy of current responsibility as allowed by law Phone # ()	such course for anot nder this section for a Liability Insurance (another citation wit	d on policy) or other fo	
Current Mailing Address:				
City:	State: Zip:			
My name is		(Last)		
Defendant Signature	Date			
State of				
County of				
Sworn to and subscribed before me on this	day of		, 20	
	SEAL)			