

**Office of Rachel M. Sadoff, CFCC  
Brevard County Clerk of Courts  
Brevard County, Florida**

**PLEA OF NO CONTEST & REQUEST FOR WITHHOLD OF ADJUDICATION**

A Plea of No Contest permits you to ask the Court to Withhold an Adjudication of Guilt (no points) without having to go to court. *You are ineligible to make this election if the violation involves a traffic crash or a violation of driving while driver's license is revoked or suspended.* *You are ineligible to make this election if you hold a commercial driver's license.* You must submit your Plea to the Clerk of Courts within 30 days of the violation date. A judge or traffic hearing officer will review your past driving history and your signed request to determine whether to grant or deny your plea. Do not submit payment with the initial plea request. After the hearing officer reviews your request and renders a decision, payment and any school completions will be due within the time indicated on the Disposition/Court Order.

\* You are only permitted to submit a Plea of No Contest and Request for Withhold of Adjudication once in a twelve (12) month period and no more than eight (8) times in a lifetime.\*

Instructions:

- \* If you choose to file a Plea of No Contest, you agree to waive your right to a speedy trial.
- \* If your plea is accepted, you will still be required to pay the civil penalty and may be ordered to attend a defensive driving school or an advanced driver improvement class.

When completing the request to enter a Plea of No Contest and Request for Withhold of Adjudication, you **MUST** select one of the following options in the event the Court denies your plea:

1. Pay the civil penalty within 30 days from the date of the Court's ruling.
2. Elect to attend defensive driving school and pay the civil penalty within 30 days of the Court's ruling and complete defensive driving school within 60 days of the Court's ruling. You must ensure that you are eligible to elect to attend the defensive driving school.
3. Plead not guilty and appear in person at a future scheduled hearing.

**If submitting your request through the mail, please mail to Brevard County Clerk of Courts, P.O. Box 219, Titusville, FL 32781-0219.**

**Remit all payments and driving school certificate(s) to the Brevard County Clerk of Courts, P.O. Box 919026, Orlando, FL 32891-9026.**

The Civil Traffic Hearing Officer has sixty (60) days from the filing of the conditional plea to render a decision. You may review your case by visiting the Clerk of Court's website at [www.brevardclerk.us](http://www.brevardclerk.us) > Public Records Search > Case Search category.

To determine your eligibility to attend defensive driving school, check the Department of Highway Safety and Motor Vehicles website at <http://www.flhsmv.gov>.

**IN THE COUNTY COURT, EIGHTEENTH JUDICIAL CIRCUIT,  
BREVARD COUNTY, FLORIDA**

**DIVISION:**

**CASE No.: 05 - - TR - -**

**PLAINTIFF**

**CITATION NUMBER:**

**State of Florida**

**PAYABLE FINE AMOUNT:**

**vs.**

**SCHOOL FINE AMOUNT:**

**DEPUTY CLERK:**

**DEFENDANT**

**PLEA OF NO CONTEST & REQUEST FOR WITHHOLD OF ADJUDICATION  
(No Points)**

I, \_\_\_\_\_, do hereby plead No Contest to the above referenced citation and ask the Court to Withhold Adjudication. I understand that I will be assessed a civil penalty and may be ordered to attend a defensive driving improvement course. I understand that by making this request, I am waiving my right to a speedy trial.

Should the Court deny my request for a Withhold of Adjudication, I request one (1) of the following options by indicating one of the following numbered selections in the box below.

1. Pay the civil penalty within 30 days from the date of the Court's ruling.
2. Pay the school civil penalty within 30 days of the Court's ruling and complete defensive driving school within 60 days of the Court's ruling. I certify that I am eligible to elect to attend the defensive driving school.
3. Plead not guilty and appear in person at a future scheduled hearing. I request that my hearing be held before a **HEARING OFFICER** **JUDGE**. If I cannot personally appear, I understand that I may exercise the option to provide an Affidavit of Defense as described in Rule of Traffic Procedure 6.340.

**I select option # \_\_\_\_ should my request be denied.**

I understand that I am only permitted to plead No Contest and Request a Withhold of Adjudication once in a twelve (12) month period and no more than eight (8) times in my lifetime. I understand that I may not make this election if I hold a commercial driver's license. I, \_\_\_\_\_ confirm that I am eligible to make this request.

**CASE No.: 05 - - TR - -**

I understand that if I fail to complete any requirement(s) of this election, my driver's license will be suspended and I will be assessed additional fees.

\_\_\_\_\_  
Defendant's Signature

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Defendant's Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
E-Mail Address

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Phone Number

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\_\_\_\_\_  
E-Mail Address