

Please use this form only if you DO NOT have your original road side ticket.

TO PLEA BY MAIL (NOT TO BE USED FOR MISDEMEANORS)

If you are pleading "GUILTY" by mail, complete and sign section A, then place an "X" through section B.

If you are pleading "NOT GUILTY" by mail, complete and sign section B, then place an "X" through section A.

- Mail this form to the Parma Town Court by Registered Mail, Certified Mail with Return Receipt Requested, or First Class Mail to Parma Town Court, 1300 Hilton Parma Corners Rd., Hilton, NY 14468.
- DO NOT use this form for Misdemeanors or for a third subsequent speeding violation in an 18 month period, Instead you must appear in person at the Parma Town Court, 1300 Hilton Parma Corners Rd., Hilton, NY 14468.
- If the Court denies your plea, you will be notified by mail to appear in Parma Town Court.

SECTION A – PLEA OF GUILTY

To Parma Town Court

I, _____

Residing at _____

Have been charged with the violation of Section _____ of the NY Vehicle and Traffic Law, specifically _____ (please write the section(s) of law and nature of the charge(s) you would like to plead GUILTY to here) _____. I acknowledge receipt of the warning as printed in bold type on the Uniform Traffic Ticket: **"A PLEA OF GUILTY TO THIS CHARGE IS EQUIVALENT TO A CONVICTION AFTER TRIAL. IF YOU ARE CONVICTED, NOT ONLY WILL YOU BE LIABLE TO A PENALTY, BUT IN ADDITION, YOUR LICENSE TO DRIVE A MOTOR VEHICLE OR MOTORCYCLE, AND YOUR CERTIFICATE OF REGISTRATION, IF ANY, ARE SUBJECTED TO SUSPENSION AND REVOCTION AS PRESCRIBED BY LAW."** I also waive arraignment in open Court and the aid of an Attorney. I therefore plead **GUILTY** to the offense(s) as charged and request that this charge be disposed of and a fine or penalty fixed by the court. Additionally, I make the following statement of explanation (optional)

All statements are made under penalty or perjury:

Date: _____ Signed: _____

Due to COVID-19 we will not be open for in person transactions until further notice.
For your convenience you may place this form in a sealed envelope with your current contact information in the drop box outside of Town Hall. You may also mail this filled out form to Parma Town Court.

Office Hours: Monday – Friday 9:00 AM – 4:00 PM
1300 Hilton Parma Corners Road
Hilton, New York 14468



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SECTION B – PLEA OF NOT GUILTY

The following notice applies to you if the officer did not issue you a supporting deposition with your ticket.

NOTICE: YOU ARE ENTITLED TO RECEIVE A SUPPORTING DEPOSITION FURTHER EXPLAINING THE CHARGE(S) PROVIDED YOU REQUEST SUCH SUPPORTING DEPOSITIONS WITHIN THIRTY (30) DAYS FROM THE DATE YOU ARE DIRECTED TO RESPOND TO THE PARMA TOWN COURT.

DO YOU REQUEST A SUPPORTING DEPOSITION? Yes: No:

(Please write the ticket number you would like to plead NOT GUILTY to here) _____

Signature: _____

Address: _____

City: _____ State: _____ Zip Code: _____

NOTE: Mail this NOT GUILTY Plea within 48 hours. The Court will notify you by First Class Mail of your trial date.

APPLICANTS UNDER 18 YEARS OF AGE MUST SUBMIT THE NAME AND ADDRESS OF A PARENT OR LEGAL GUARDIAN BELOW.

Name of Parent or Guardian _____

Address: _____

City: _____ State: _____ Zip Code: _____

FAILURE TO ANSWER THIS TICKET WILL RESULT IN THE SUSPENSION OF YOUR LICENSE AND MAY RESULT IN A DEFAULT JUDGMENT ENTERED AGAINST YOU.

Please print this form out and complete it with an INK PEN. If you have more than one ticket please print a form and fill it out for each ticket you have in Parma Town Court. If you submit an incomplete GUILTY or NOT GUILTY form, the Parma Town Court will not accept your plea and your license may be suspended for failure to respond to your ticket. If you have any questions regarding your ticket including needing your ticket number to plead GUILTY or NOT GUILTY please contact the Parma Town Court at (585) 392 - 9470

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