

Deferred Disposition Request Form

Citation Number _____

I wish to enter a plea of: _____ GUILTY _____ NO CONTEST and waive my right to trial by jury and request deferred disposition. I have not been granted deferred disposition by the Mesquite Municipal Court within the past 12 months.

Signature

Day Time Telephone Number

Address

City, State, Zip Code

RETURN COMPLETED DEFERRED ADJUDICATION FORM WITH:

- Payment of Deferred Disposition fee which is the same amount as the fine.

If you receive no conviction for any other offense in the City of Mesquite within 90 days, the charge will be dismissed.

Print and fill out this form and return to:
Attn: Municipal Court
City of Mesquite
PO Box 850137
Mesquite, TX 75185

Internet Form