

**City of Austin Municipal Court**  
**Deferred Disposition Request**  
**Criminal Misdemeanor**

Cause or Citation Number: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Name (as shown on citation- please print): \_\_\_\_\_

\_\_\_\_\_ Address is correct as shown in case file; OR

\_\_\_\_\_ Address has changed to: \_\_\_\_\_

(Please print)

\_\_\_\_\_

I hereby enter a plea of “no contest” to the violation of \_\_\_\_\_ and waive my right to a jury trial. I request that the Court allow me to complete a Deferred Disposition sentence for this case. I understand that if I successfully complete the terms of the Deferred Disposition in a timely manner, my case will be dismissed. If I do not successfully complete the terms of the Deferred Disposition, I will be sent a notice to appear in court to show cause why I did not complete the terms of this deferral. If cause is not sufficient, I understand that the Deferred Disposition will be revoked, and a judgment of guilt entered.

I understand this Deferred Disposition is only available if I respond by my appearance date. I understand that the deferral period, if approved, is **90 days** from the date this form is postmarked and agree to the terms of this Deferred Disposition which are:

1. Payment must be made immediately in the amount of \$100; you cannot pay online but must attach a check or money order; contact the court if you cannot pay immediately; **and**
2. Commit no offense within the City limits of Austin, Texas; **and**
3. Notify the Court in writing of any change of address.

\_\_\_\_\_  
Defendant Signature / Attorney of Record

\_\_\_\_\_  
Date Signed

Send form and payment to Austin Municipal Court, P.O. Box 2135, Austin, TX 78768  
or visit one of our three locations.

Case information is available at [www.austintexas.gov/court](http://www.austintexas.gov/court).