

C.I.  
 MIS.  
 JUV.

### State of Michigan Uniform Law Citation

Ticket No.  Victim Involved

Incident No. Dept. No.

The People of:  the State of Michigan  
 Township  City  Village  County

Local Use/Arrest No. Offense Code

BAC

OF: \_\_\_\_\_ of \_\_\_\_\_

THE UNDERSIGNED Month Day Year At approximately  A.M. Date of Birth Month Day Year  
SAYS THAT ON:  P.M.

State  Oper./Chauff. Driver License Number SSN (last 4 digits)  
 CDL

Race Sex Height Weight Hair Eyes Occupation/Employer

Name (First, Middle, Last)

Street

City State Zip Code

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Veh. Type

THE PERSON NAMED ABOVE, in violation of § \_\_\_\_\_

Local Ordinance  State Law  Administrative Rule

UPON \_\_\_\_\_

AT OR NEAR \_\_\_\_\_

WITHIN  CITY  VILLAGE  TOWNSHIP OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_ DID THE FOLLOWING

- Nuisance Ordinance
- Licenses Ordinance
- Zoning Ordinance
- Sign, Lighting & Display Ordinance
- Animal & Fowl Ordinance
- Other \_\_\_\_\_
- Building Code
- Plumbing Code
- Electrical Code
- Mechanical Code
- Defective Equipment
- Speeding \_\_\_\_\_ MPH in a \_\_\_\_\_ MPH Zone (formerly \_\_\_\_\_ MPH Zone)
- Disobey Traffic Signal
- Disobey Stop Sign
- No Operator's License in Possession

Describe/Remarks:

CHECK IF APPROPRIATE  Damage to Property  Local Court Bond \$ \_\_\_\_\_  
 Vehicle Impounded  Injury  License Posted in Lieu of Bond  
 Traffic Crash  Death  Appearance Certificate  
Person in Active Military Service  Yes  No  None

C.I.  
 MIS.  
 JUV.

SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS

Appearance Date on or before \_\_\_\_\_

Hearing Date (if applicable) on \_\_\_\_\_  Contact Court

Juvenile Traffic Misd. (Court will Notify)  Formal Hearing Required. (Court will Notify)

In the \_\_\_\_\_ Court of \_\_\_\_\_

Court Address & Phone Number

I personally served a copy of the complaint upon the defendant.  
 I served a copy of the complaint upon the owner/occupant by posting and by sending a copy to the owner by first class mail at the last known address.

**I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.**

Complainant's Signature and receipt if applicable Month Day Year

Officer's Name (printed) Officer's ID No.

Agency ORI Agency Name

MI-

Violation for Which Court May Waive Fine/Costs: Correct the violation. Present the citation to any law enforcement officer to certify the correction. Mail or bring the citation to the court clerk at the address shown above before your appearance or hearing date.

**OFFICER CERTIFICATION** I certify that the violation described above has been corrected.

Officer's Signature Officer's ID No. Date

Agency ORI Agency Name

UC-01b (rev. 6/05)

- C.I.
- MIS.
- JUV.

**State of Michigan  
Uniform Law Citation**

Ticket No.  Victim Involved

Incident No. Dept. No.

The People of:  the State of Michigan  
 Township  City  Village  County

Local Use/Arrest No. Offense Code

BAC

OF: \_\_\_\_\_ of \_\_\_\_\_

THE UNDERSIGNED Month Day Year At approximately  A.M. Date of Birth Month Day Year  
 SAYS THAT ON:  P.M.

State  Oper./Chauff. Driver License Number SSN (last 4 digits)  
 CDL

Race Sex Height Weight Hair Eyes Occupation/Employer

Name (First, Middle, Last)

Street

City State Zip Code

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Veh. Type

THE PERSON NAMED ABOVE, in violation of § \_\_\_\_\_

Local Ordinance  State Law  Administrative Rule

UPON \_\_\_\_\_

AT OR NEAR \_\_\_\_\_

WITHIN  CITY  VILLAGE  TOWNSHIP OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_ DID THE FOLLOWING

- Nuisance Ordinance  Building Code  Speeding \_\_\_\_\_ MPH in a \_\_\_\_\_ MPH Zone (formerly \_\_\_\_\_ MPH Zone)
- Licenses Ordinance  Plumbing Code  Disobey Traffic Signal
- Zoning Ordinance  Electrical Code  Disobey Stop Sign
- Sign, Lighting & Display Ordinance  Mechanical Code  No Operator's License in Possession
- Animal & Fowl Ordinance  Defective Equipment
- Other \_\_\_\_\_

Describe/Remarks:

CHECK IF APPROPRIATE  Damage to Property  Local Court Bond \$ \_\_\_\_\_  
 Vehicle Impounded  Injury  License Posted in Lieu of Bond  
 Traffic Crash  Death  Appearance Certificate  
 Person in Active Military Service  Yes  No  None

- C.I.
- MIS.
- JUV.

SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS

Appearance Date on or before \_\_\_\_\_

Hearing Date (if applicable) on \_\_\_\_\_  Contact Court

Juvenile Traffic Misd. (Court will Notify)  Formal Hearing Required. (Court will Notify)

In the \_\_\_\_\_ Court of \_\_\_\_\_

Court Address & Phone Number

- I personally served a copy of the complaint upon the defendant.
- I served a copy of the complaint upon the owner/occupant by posting and by sending a copy to the owner by first class mail at the last known address.

**I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.**

Complainant's Signature and receipt if applicable Month Day Year

Officer's Name (printed) Officer's ID No.

Agency ORI Agency Name

MI-

Violation for Which Court May Waive Fine/Costs: Correct the violation. Present the citation to any law enforcement officer to certify the correction. Mail or bring the citation to the court clerk at the address shown above before your appearance or hearing date.

**OFFICER CERTIFICATION** I certify that the violation described above has been corrected.

Officer's Signature Officer's ID No. Date

Agency ORI Agency Name

UC-01b  
(rev. 6/05)

- C.I.
- MIS.
- JUV.

**State of Michigan  
Uniform Law Citation**

Ticket No.  Victim Involved

Incident No. Dept. No.

The People of:  the State of Michigan  
 Township  City  Village  County

Local Use/Arrest No. Offense Code

BAC

OF: \_\_\_\_\_ of \_\_\_\_\_

THE UNDERSIGNED Month Day Year At approximately  A.M. Date of Birth Month Day Year  
 SAYS THAT ON:  P.M.

State  Oper./Chauff. Driver License Number SSN (last 4 digits)  
 CDL

Race Sex Height Weight Hair Eyes Occupation/Employer

Name (First, Middle, Last)

Street

City State Zip Code

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Veh. Type

THE PERSON NAMED ABOVE, in violation of § \_\_\_\_\_

- Local Ordinance
- State Law
- Administrative Rule

UPON \_\_\_\_\_

AT OR NEAR \_\_\_\_\_

WITHIN  CITY  VILLAGE  TOWNSHIP OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_ DID THE FOLLOWING

- Nuisance Ordinance
- Building Code
- Speeding \_\_\_\_\_ MPH in a \_\_\_\_\_ MPH Zone (formerly \_\_\_\_\_ MPH Zone)
- Licenses Ordinance
- Plumbing Code
- Disobey Traffic Signal
- Zoning Ordinance
- Electrical Code
- Disobey Stop Sign
- Sign, Lighting & Display Ordinance
- Mechanical Code
- Defective Equipment
- No Operator's License in Possession
- Animal & Fowl Ordinance
- Other \_\_\_\_\_

Describe/Remarks:

- CHECK IF APPROPRIATE
- Damage to Property
  - Local Court Bond \$ \_\_\_\_\_
  - Vehicle Impounded
  - Injury
  - License Posted in Lieu of Bond
  - Traffic Crash
  - Death
  - Appearance Certificate
  - Person in Active Military Service  Yes  No
  - None

- C.I.
- MIS.
- JUV.

SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS

Appearance Date on or before \_\_\_\_\_

Hearing Date (if applicable) on \_\_\_\_\_  Contact Court

Juvenile Traffic Misd. (Court will Notify)  Formal Hearing Required. (Court will Notify)

In the \_\_\_\_\_ Court of \_\_\_\_\_

Court Address & Phone Number

- I personally served a copy of the complaint upon the defendant.
- I served a copy of the complaint upon the owner/occupant by posting and by sending a copy to the owner by first class mail at the last known address.

**I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.**

Complainant's Signature and receipt if applicable Month Day Year

Officer's Name (printed) Officer's ID No.

Agency ORI Agency Name

MI-

Violation for Which Court May Waive Fine/Costs: Correct the violation. Present the citation to any law enforcement officer to certify the correction. Mail or bring the citation to the court clerk at the address shown above before your appearance or hearing date.

**OFFICER CERTIFICATION** I certify that the violation described above has been corrected.

Officer's Signature Officer's ID No. Date

Agency ORI Agency Name

UC-01b (rev. 6/05)

- C.I.
- MIS.
- JUV.

**State of Michigan  
Uniform Law Citation**

Ticket No.  Victim Involved

Incident No. Dept. No.

The People of:  the State of Michigan  
 Township  City  Village  County

Local Use/Arrest No. Offense Code

BAC

OF: \_\_\_\_\_ of \_\_\_\_\_

THE UNDERSIGNED Month Day Year At approximately  A.M. Date of Birth Month Day Year  
 SAYS THAT ON:  P.M.

State  Oper./Chauff. Driver License Number SSN (last 4 digits)  
 CDL

Race Sex Height Weight Hair Eyes Occupation/Employer

Name (First, Middle, Last)

Street

City State Zip Code

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Veh. Type

THE PERSON NAMED ABOVE, in violation of § \_\_\_\_\_

- Local Ordinance
- State Law
- Administrative Rule

UPON \_\_\_\_\_

AT OR NEAR \_\_\_\_\_

WITHIN  CITY  VILLAGE  TOWNSHIP OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_ DID THE FOLLOWING

- Nuisance Ordinance
- Building Code
- Speeding \_\_\_\_\_ MPH in a \_\_\_\_\_ MPH Zone (formerly \_\_\_\_\_ MPH Zone)
- Licenses Ordinance
- Plumbing Code
- Disobey Traffic Signal
- Zoning Ordinance
- Electrical Code
- Disobey Stop Sign
- Sign, Lighting & Display Ordinance
- Mechanical Code
- Defective Equipment
- No Operator's License in Possession
- Animal & Fowl Ordinance
- Other \_\_\_\_\_

Describe/Remarks:

- CHECK IF APPROPRIATE
- Damage to Property
  - Local Court Bond \$ \_\_\_\_\_
  - Vehicle Impounded
  - Injury
  - License Posted in Lieu of Bond
  - Traffic Crash
  - Death
  - Appearance Certificate
  - Person in Active Military Service  Yes  No
  - None

- C.I.
- MIS.
- JUV.

SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS

Appearance Date on or before \_\_\_\_\_

Hearing Date (if applicable) on \_\_\_\_\_  Contact Court

Juvenile Traffic Misd. (Court will Notify)  Formal Hearing Required. (Court will Notify)

In the \_\_\_\_\_ Court of \_\_\_\_\_

Court Address & Phone Number

- I personally served a copy of the complaint upon the defendant.
- I served a copy of the complaint upon the owner/occupant by posting and by sending a copy to the owner by first class mail at the last known address.

**I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.**

Complainant's Signature and receipt if applicable Month Day Year

Officer's Name (printed) Officer's ID No.

Agency ORI Agency Name

MI-

Violation for Which Court May Waive Fine/Costs: Correct the violation. Present the citation to any law enforcement officer to certify the correction. Mail or bring the citation to the court clerk at the address shown above before your appearance or hearing date.

**OFFICER CERTIFICATION** I certify that the violation described above has been corrected.

Officer's Signature Officer's ID No. Date

Agency ORI Agency Name

UC-01b  
(rev. 6/05)

Name: Last First Middle

District Court Register of Actions  Change of address listed below Citation No.

Violation Date Case No.

**Bond History**  Per. Recog.  Conditional  Cash  Surety  10% Cash  Real Property  
 Amount/Value of Bond: \$ Set by:

**Appearance** Attorney name  Waived  Requested:  
 Date:  Retained  Grant  Deny

**Plea**  Admit  Guilty  Mute, Not Guilty  Admit with Explanation  
 Deny  Not Guilty  No Contest

**Hearing/Trial Date**  Formal Hearing  Informal Hearing  Jury Trial  Non-Jury Trial  
 Hrg/Trial Date Time  a.m.  p.m. Adjournment Date Time  a.m.  p.m.

Notices to:  Local Attorney  Pros. Attorney  Police Agency **Findings**  Responsible  Not Responsible  By Default  
 Defendant  Def. Attorney  Guilty  Not Guilty  As Charged  Nolle Prosequi  
 Guilty as Amended  Dismissed

**Sentence**  State  Ordinance  
 Fine Court Costs State Fees Bond Fee Other Witness Fees Credit Total  
 \$ \$ \$ \$ \$ \$ \$ \$ \$

Days Credit Days Payment Date Installment Amount and Terms \$

Additional Sanctions

**Appeals**  
 Appeal Bond \$ Appeal to: Court

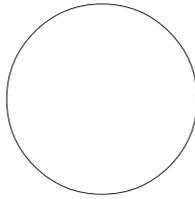
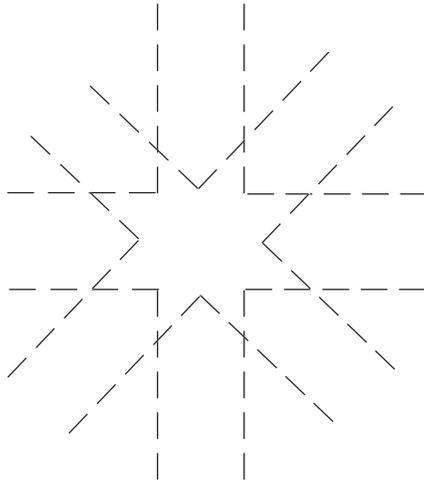
**DATE ACTIONS, CASE NOTES**

		Name: Last
		First
		Middle
		Citation No.

Judge/Magistrate/Deputy Clerk  
**COURT COPY**



**OFFICER'S NOTES**



INDICATE NORTH  
BY ARROW

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WEATHER	HIGHWAY	TRAFFIC	LIGHT
<input type="checkbox"/> Clear	<input type="checkbox"/> Dry	<input type="checkbox"/> Concrete	<input type="checkbox"/> Light
<input type="checkbox"/> Cloudy	<input type="checkbox"/> Wet	<input type="checkbox"/> Blacktop	<input type="checkbox"/> Medium
<input type="checkbox"/> Raining	<input type="checkbox"/> Muddy	<input type="checkbox"/> Gravel	<input type="checkbox"/> Heavy
<input type="checkbox"/> Snowing	<input type="checkbox"/> Snowy	<input type="checkbox"/> Unimproved	<input type="checkbox"/> Vehicle
<input type="checkbox"/> Fog	<input type="checkbox"/> Icy	<input type="checkbox"/> Divided	<input type="checkbox"/> Pedestrian
<input type="checkbox"/> Sleet	<input type="checkbox"/> Loose material _____ lanes	<input type="checkbox"/> Cross Traffic	<input type="checkbox"/> Daylight
			<input type="checkbox"/> Darkness
			<input type="checkbox"/> Dawn
			<input type="checkbox"/> Dusk
			<input type="checkbox"/> Other _____

**Remarks**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DISPOSITION**

Judge/Magistrate \_\_\_\_\_

Court \_\_\_\_\_ Date \_\_\_\_\_

Location \_\_\_\_\_

Findings:  Guilty/Responsible  Not Guilty/Responsible  Dismissed

Probation \_\_\_\_\_ Other \_\_\_\_\_

Remarks \_\_\_\_\_

\_\_\_\_\_

**POLICE/ENFORCEMENT AGENCY/PROSECUTOR COPY**



**MISDEMEANOR  
READ CAREFULLY**

**NOTICE TO DEFENDANT**

You must appear at the time and place indicated on the front of this complaint or a warrant will be issued for your arrest.

**RIGHTS You have the right to:**

1. Plead guilty or not guilty.
2. Be represented by an attorney. If you cannot afford to hire one, the court may appoint an attorney to represent you.
3. Have a trial by judge or jury.
4. Confront and present witnesses.
5. Testify or remain silent.
6. Be presumed innocent until proven guilty.
7. Have all charges arising out of the same transaction determined in a single trial.

**When you appear before the court, be sure to bring this complaint with you.**

---

---

**APPEARANCE, PLEA OF GUILTY, AND WAIVER**

I enter my appearance to the offense charged on the front side of this complaint. I have read and understand that I am entitled to exercise any or all of my rights and, with that understanding, I PLEAD GUILTY and WAIVE all of these rights. I understand that this plea of guilty will have the same force and effect as a judgment of the court, HOWEVER, I understand that this conviction shall not bar prosecution of other charges against me which arose out of the same transaction.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**MISDEMEANOR COPY**

**CIVIL INFRACTION - READ CAREFULLY**

**WARNING:** If you fail to appear by the date specified on the front of this citation or at the date and time scheduled for hearing, a default judgment will be entered against you. A person who fails to answer a citation is guilty of a misdemeanor. Timely application to the court for a hearing or return of the citation with an admission of responsibility and with full payment of applicable civil fines and costs constitute a timely appearance.

**If this is a traffic violation and you fail to answer this citation or a notice to appear, the Secretary of State will suspend your driver license.**

If this is a state civil infraction and you fail to answer this citation or a notice to appear, the Secretary of State will not issue or renew your driver license.

If this is a municipal civil infraction and you fail to answer this citation or a notice to appear in court or to comply with a judgment, the municipal agency that alleged the violation and the prosecutor may try to collect the judgment through civil post judgment collection procedures.

You are alleged to be responsible for a civil infraction. You must either:

- **Admit Responsibility** (including full payment); or
- **Admit Responsibility with Explanation**; or
- **Deny Responsibility**

**ADMIT RESPONSIBILITY** by mail, in person, or by representation.

**BY MAIL.** Contact the court indicated on the front of this citation and obtain the amount of your fine and costs. Sign below. Mail this copy with your certified check or money order to the court clerk, on or before the date specified on the front of this citation.

**IN PERSON OR BY REPRESENTATION.** Sign below. You or your representative must bring this copy to the court clerk at the address indicated on the front of this citation on or before the date specified on the front of this citation.

**I enter my appearance, waive my right to a hearing, and I admit responsibility for the civil infraction alleged on the front of this citation.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**ADMIT RESPONSIBILITY WITH EXPLANATION.** You may admit responsibility with explanation of the circumstances of the violation which the court may consider in determining the amount of your fine and costs. You may admit responsibility with explanation by mail, in person, or by representation.

**IN PERSON OR BY REPRESENTATION.** Contact the court on or before the date specified on the front of this citation in person, by mail, by telephone, or by representation to obtain a time to appear in court to give your explanation.

**BY MAIL.** Sign below. Mail this copy and your explanation on a separate sheet of paper to the court clerk at the address indicated on or before the date specified on the front of this citation. The court will mail you its determination and, if applicable, order any fine and costs to be paid by you.

**I enter my appearance by mail, waive my right to a hearing, and admit responsibility with explanation for the civil infraction alleged on the front of this citation.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**DENY RESPONSIBILITY.** To deny responsibility you must either:

1. Appear in person in court for an informal hearing before a magistrate, referee, or judge; neither side may have an attorney, OR
2. Appear in court for a formal hearing before a judge. An attorney will be with the officer. You may be represented by an attorney.

If a **hearing date** is specified on the front of this citation, you must appear on that date for an informal hearing unless you contact the court at least 10 days before that date by mail, telephone, representation, or in person to request a formal hearing.

If an **appearance date** is specified on the front of this citation, you must contact the court on or before that date by mail, telephone, representation, or in person to obtain a hearing date. The court will schedule an informal hearing unless you request a formal hearing. A municipal agency may also request a formal hearing.

Notify the court and the Secretary of State immediately if you change your address.

**PLEASE NOTE:** If you do not understand these instructions, or if you have questions about what you must do, contact the court in person or by telephone on or before the appearance date or hearing date specified on the front of this citation.

**CIVIL INFRACTION COPY**