

# St. Lawrence County District Attorney

48 Court Street, County Courthouse

Canton, New York 136171169

Telephone: 315-379-2225

Fax: 315-379-2301

NICOLE M. DUVÉ  
DISTRICT ATTORNEY



## INSTRUCTION SHEET

### VEHICLE AND TRAFFIC CHARGE REQUEST FOR REDUCTION

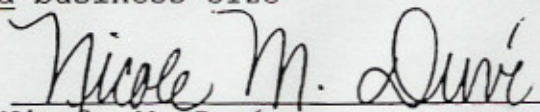
Filling out this form does not excuse you from scheduled court appearances! You may, however, call the court and request an adjournment to allow you the time to receive a response from this office. Court numbers are listed on the reverse side of this letter.

Attached is a form to request a reduction of Vehicle and Traffic Law charges. The form must be entirely completed and returned to the Office of the District Attorney. A review of your request will be conducted and a determination will be made. You will receive a copy of the recommendation that we submit to the Court, provided you have enclosed a self-addressed stamped envelope, but the Court will have the final say as to whether or not the reduction will be granted.

This office will give your request prompt attention only if the following instructions are fully complied with:

1. Complete form as fully as you can and return the completed form to the above address with:

- One clear and legible photocopy of each traffic ticket. If you do not have a copy of ticket, you must get one from the Court.
- A self-addressed and stamped business-size envelope.

  
Nicole M. Duvé  
St. Lawrence County  
District Attorney

St. Lawrence County District Attorney's Office

Request For Reduction of Vehicle and Traffic Charges

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Court: \_\_\_\_\_ Judge (if known) \_\_\_\_\_

Charges: \_\_\_\_\_

Date Ticket(s) Issued: \_\_\_\_\_

Arresting Agency and/or Officer: \_\_\_\_\_

Was there an accident? Yes ( ) No ( )

If yes, was there a fatality or injury? Yes ( ) No ( )

If yes, number of vehicles involved: \_\_\_\_\_

If yes, number of people injured or killed: \_\_\_\_\_

If yes, property other than vehicle damaged: \_\_\_\_\_

\*Additional written statements more fully explaining the matter can also be submitted, but are not required.

Has this case been set for trial? Yes ( ) No ( )

Do you have a lawyer? Yes ( ) No ( )

If yes, supply lawyer's name and address: \_\_\_\_\_

Date of request: \_\_\_\_\_ Signed: \_\_\_\_\_

*Nicole M. Eave*  
Nicole M. Eave  
St. Lawrence County  
District Attorney