

<input type="checkbox"/> County Court Court Address: _____  E-470 Public Highway Authority v. Defendant/Appellant: _____	<b>▲ COURT USE ONLY ▲</b>
Attorney or Party Without Attorney (Name and Address): _____  Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Citation Number: _____ Division: _____ Courtroom: _____
<b>NOTICE OF APPEAL – E-470 CASE (Pursuant to §43-4-506.5(f) or §43-4-808(2)(d)(VI), C.R.S.)</b>	

The Defendant hereby files an appeal in \_\_\_\_\_ (E-470 case number) for the following reason(s):

\_\_\_\_\_

\_\_\_\_\_

At this time, I request a stay of execution. I understand that as a condition of the stay of execution, I may be required to post a bond or deposit the amount of fines and costs assessed.

**Current information about the Defendant/Appellant:**

Full Name: \_\_\_\_\_

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

City & Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

**Said appeal shall be docketed in the County Court pursuant to §43-4-506.5(f) or §43-4-808(2)(d)(VI), C.R.S. and shall be a de novo hearing.**

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Defendant/Appellant

\_\_\_\_\_  
Signature of Attorney for Defendant/Appellant, if applicable

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) an original was filed with E470 and the County Court in the county where the violation occurred.

\_\_\_\_\_  
(Your signature)