

<input checked="" type="checkbox"/> County Court <input type="checkbox"/> District Court TELLER County, State of Colorado Court Address: P.O. BOX 997, 101 W. BENNETT AVENUE CRIPPLE CREEK, COLORADO 80813	
<hr/> THE PEOPLE OF THE STATE OF COLORADO, VS. <div style="text-align: center;">Defendant.</div> <hr/> Attorney or Party Without Attorney: Name: Address: Phone Number: FAX Number: E-mail: Atty. Reg. #:	<hr/> Case Number: Div.: Ctrm:
WAIVER OF RIGHTS AND ADMISSION OF GUILT OR LIABILITY UNDER C.R.T.I.	

You have been accused of violating the Traffic Infraction laws of the State of Colorado. A simplified procedure is available for the payment of any fines if you voluntarily admit your guilt or liability after being advised of the following rights:

YOU HAVE THE RIGHT TO:

1. Be represented by an attorney at your own expense.
2. Remain silent because any statement you make may be used against you.
3. Deny the allegations against you and have a hearing at which the allegations must be proven beyond a reasonable doubt.
4. Testify at your own choosing, subpoena witnesses, present evidence and cross-examine witnesses for the State. Trial to the court only without a jury.
5. Appeal a judgment against you.

Any answer you make must be voluntary and not the result of undue influence and you must understand that points may be assessed against your driving record if you admit guilt or liability.

ADMISSION OF GUILT OR LIABILITY

I, the undersigned, have read or been advised of the rights described above. I hereby waive these rights and voluntarily admit my guilt or liability and waive any right to appeal. I HEREBY ENTER A PLEA OF GUILTY TO THE TRAFFIC INFRACTION CHARGE OF:_____.

I ACCEPT A FINE OF \$_____, Surcharge \$_____, BRAI \$_____, CRTI \$19.00, CSCF \$5.00, GTSC \$2.50, FAMF \$1.00 and herewith pay the same to the Clerk of this Court. Plus \$30.00 Administrative Processing fee (if applicable).

TOTAL DUE: \$_____

Please sign and return with a check or money order made payable to the TELLER COMBINED COURT on or before _____ at 9:00 a.m. or appear in Court at that time.

Date: _____

Defendant

 Defendant's Address

*****PLEASE NOTE CAREFULLY*****

Your failure to EITHER sign the above and pay the fine and costs or to appear as directed in your notice will result in a judgment against you. The judgment will be reported to the State Motor Vehicle Division, which may assess points against your driving record and delay your application for a driver's license until you have paid the Court the full amount of the judgment against you. **A \$30.00 administrative fee will be assessed for your failure to pay.**