

Waiver Information

If you desire to plead guilty or nolo contendere (no contest) and you need not appear in court as indicated on the face of this notice, you must present this notice at the county court named below.

CLERK OF COURT
Collier County Courthouse, Criminal Division
3315 Tamiami Trail E., 6th Floor
Naples, FL 34112

BEFORE YOUR APPEARANCE DATE

Pay a fine of _____ dollars in cash, money order, or certified check, to the above address.

The waiver below must be completed and attached.
Read carefully.

Your failure to answer this summons in the manner subscribed will result in a warrant being issued on a separate and additional charge.

"In consideration of my not appearing in court, I, the undersigned, do hereby enter my appearance on the affidavit for the offense(s) charged on the other side of this notice and waive the reading of the affidavit in the above named cause and the right to be present at the trial of said action.

I hereby enter my plea of Guilty OR Nolo Contendere and waive my right to prosecute appeal or error proceedings."

"I understand the nature of the charge(s) against me; I understand my right to have counsel and waive this right and the right to a continuance. I waive my right to trial before a judge or jury.

I plead Guilty or Nolo Contendere to the charge being fully aware that my signature to this plea will have the same effect as a judgment of this court."

Total Fine and Cost _____

Defendant Signature _____

Defendant (PRINT NAME) _____

If Juvenile, Signature of Parent or Guardian _____

If Juvenile, Signature of Parent or Guardian (PRINT NAME) _____

Street Address: _____

Civil Citation Terms and Conditions

Solely for the purpose of the Civil Citation Program, I admit to the offense(s) cited and waive my right to appear in court. I agree to have my case handled by the Collier County Sheriff's Office Civil Citation Program. I agree to complete my community work service hours assigned by the Civil Citation Coordinator and any other sanctions, by the deadline assigned by the Civil Citation Coordinator. I understand that I will be arrested and prosecuted for the offense(s) listed above if:

- I fail to show for work assignments
- I fail to complete the work assignments and/or other sanctions
- I fail to demonstrate proper work ethics, respect and compliance through all program requirements

Parent / Guardian Notification

- I have been explained what is required of my child and approve his / her participation in the Civil Citation Program
- Drug related charges are a minimum 40 hours with random drug screening for all charges
- Civil Citation hours can be increased up to 50 hours by the Civil Citation Coordinator if found in violation of any of the above
- Civil Citation work days will be every week (for at least 5 hours) until hours are completed or excused by the Civil Citation Coordinator

Important

You must contact the Civil Citation Coordinator, at (239) 252-0076 or e-mail civilcitation@colliersheriff.org within 72 hours of the charge, so your child can commence with their community service hours. Failure to make contact with the Civil Citation Coordinator will result in criminal charges being filed and your child will have an arrest record.