

**PARKER JUSTICE COURT
1105 ARIZONA AVE
PARKER, AZ 85344**

REQUEST FOR TTEAP WAIVER REVIEW

General Information:

A Ticket Enforcement Assistance Program (TTEAP) Registration Waiver review will not be conducted more than 30 days prior to the vehicle registration renewal date.

You must provide certain detailed information and documentation to the Parker Justice Court when requesting a TTEAP Waiver.

When requesting a waiver, you must have with you:

1. A valid Arizona driver license
2. A copy of the TTEAP Notice mailed by the State of Arizona, Motor Vehicle Division
3. Complete documentation which supports your request

Instructions for completing the Request for Waiver Review form:

The **Request for TTEAP Waiver Review** form must be completed and returned to the court with the documentation that supports your request.

On the **Request for the TTEAP Waiver Review** form, please write:

1. Defendant's name
2. Defendant's address, city state and zip code
3. Case/Charge number(s)
4. Requestor's name (if not defendant)
5. Requestor's relationship to the defendant
6. Circle "yes" or "no" to indicate whether you have a valid Arizona driver license
7. Circle "yes" or "no" to indicate whether the registration renewal date is within the next 30 days
8. Circle "yes" or "no" to indicate whether your name appears on the registration
9. Check (✓) a box to indicate which of the following reasons (incarceration, military, deployment, hospitalized, serious medical condition, death in immediate family, or legal separation/divorce) demonstrates why failure to pay fines/fees due was not an intentional refusal to obey a court order
10. Sign and date the form

When you have completed this form and obtained the appropriate documentation, you must come to the Parker Justice Court, and report to the Financial Enforcement Unit. A Financial Enforcement Officer will review your request form and the documentation you have provided.

If the information you provide meets the Parker Justice Court TTEAP Registration Waiver criteria, you will be asked to complete a Financial Statement and an Application for TTEAP Waiver form. On the Application for TTEAP Waiver form you will be required to explain:

- Why the non-renewal of the vehicle registration is an economic hardship
- Why the failure to pay the amount due is not an intentional refusal to obey a court order, and
- What good faith efforts have been made in the last 3 months to obtain the monies to pay the balance due.

Defendant Name _____ Address _____ City _____ State _____ Zip _____	Defendant Case(s)/Charges _____ _____ _____	Request for TTEAP Waiver Review
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Requestor (If not Defendant) _____	Relationship to Defendant _____
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Pursuant to A.R.S. §28-1633, your vehicle registration is on hold until all fines, fees and sanctions are satisfied. Documentation is required for each of the items that you mark below. Once you have obtained the documentation, please bring it to Financial Screening and a determination will be made, at the time, if you meet the Parker Justice Court TTEAP Registration Waiver criteria. **A waiver may be granted if you demonstrate why the non-renewal of the vehicle registration is an economic hardship, why the failure to pay the amount due is not an intentional refusal to obey a court order and what good faith efforts have been made in the last three (3) months to obtain the monies to pay the balance due.**

COMPLETE THE FOLLOWING	REQUIRED DOCUMENTATION
YES/NO Do you have a valid Arizona driver license?	Driver license # and expiration date
YES/NO Is the registration renewal date within the next 30 days?	Copy of registration
YES/NO Does your name appear on the vehicle registration?	

If any one of the following circumstances occurred within the past three (3) months, you must provide the required documentation with your request for a TTEAP waiver review.

CIRCUMSTANCE	REQUIRED DOCUMENTATION
<input type="checkbox"/> Incarceration (In Jail)	Time computation form
<input type="checkbox"/> Military Deployment	Orders for Deployment
<input type="checkbox"/> Hospitalized	Original letter from attending Physician on Physician's letterhead specifying diagnosis, hospital and date (s) of hospitalization.
<input type="checkbox"/> Serious medical condition	Original letter from attending Physician on Physician's letterhead specifying diagnosis, prognosis and date(s) incapacitated.
<input type="checkbox"/> Death in immediate family	Certified copy of Death Certificate
<input type="checkbox"/> Legal separation or divorce	Separation or divorce petition or decree

 Defendant/Requestor _____
 Date

If the request for the waiver is denied, the defendant/requestor has the opportunity for a judicial review

For _____ Court use only	
Does information provided qualify for an application for a TTEAP waiver? Y/N	Reason:

