

KANE COUNTY JUSTICE COURT
State of Utah
76 North Main Street, Kanab, UT 84741
(435) 644-2351 – telephone; (435) 644-2052 – fax
jckane@utcourts.gov

STATE OF UTAH/CITY OF KANAB Plaintiff, Vs. _____ Defendant.	PLEA IN ABEYANCE REQUEST Citation/Case No. _____
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I am the Defendant and represent to and request of the Court as follows:

1. I was issued a traffic citation and have read the Criteria and Terms and Conditions for obtaining a Plea in Abeyance for this citation.
2. Knowing that the making of a false written statement is a class B misdemeanor, as provided in Section 78B-5-7-5, UCA, I declare, under criminal penalty of the State of Utah, that I meet the Criteria for a Plea in Abeyance. I acknowledge that if my driving history, submitted at the end of the 6-month Plea in Abeyance Period, does not show that I was eligible for a Plea in Abeyance, I will be required to appear in Court and show why my Plea in Abeyance should not be revoked and my guilty plea entered as a conviction.
3. I waive the right to an Information, which is a formal charging document, enter my guilty plea(s) to the offense(s) charged in the traffic citation, represent to the Court that I am guilty of the (these) offense(s) and there is a factual basis for my plea(s), and ask that the Court hold my plea(s) in abeyance pursuant to the prosecutor’s standing motion and subject to the Terms and Conditions for a Plea in Abeyance.
4. I understand that I must strictly comply (NO EXCEPTIONS) with the Terms and Conditions of the Plea in Abeyance Order and in the time provided in the Plea in Abeyance Order. I acknowledge that if I do not strictly comply with the Plea in Abeyance Order the Court will issue an Order to Show Cause requiring me to appear and show why my Plea in Abeyance should not be terminated, why judgment of conviction should not be entered, and why sentence should not be imposed. I agree to contact the Court if I receive such an Order and recognize that the Court can proceed with this hearing in my absence if I do not appear.
5. I know I have a right to be represented by an attorney in this matter and I voluntarily, knowingly, and intentionally waive the right to an attorney. OR My attorney is _____.
6. I know I have a right to be sentenced in not less than 2 nor more than 45 days and I knowingly and intentionally waive that right so my plea(s) can be held in abeyance.
7. I know that if I pay for my traffic citation online before the Court receives this Request and issues a Plea in Abeyance Order, I will cancel this Request, my payment will be treated as a bail forfeiture and reported to the Utah Driver License Division as a conviction, and my case will be closed.

DATED this ____ day of _____, 201__.

Address

Email Address

Defendant’s Signature
(_____) _____
Telephone Number

*This Request may be saved and emailed as an attachment to the email address listed above.
By submitting this Request digitally, I acknowledge that my e-Signature is an actual representation of my signature for the purpose of legally binding this document.*