

ATLANTA, GEORGIA DISPUTE FORM

Notice of Citation Number: _____

Vehicle License Plate Number: _____ State: _____

In the space above, you must accurately write the 13-digit Notice Number that appears in the box in the upper right of the front of the Notice of Citation. Also please provide the license plate number and state for the vehicle involved in the Citation. If you choose to complete this form by hand, please print legibly. A copy of your Notice of Citation must be included with this request to ensure proper processing. Please attach ALL supporting documents with this dispute form and bring the original(s) to Court.

Hearing Date provided on Second Notice of Citation

If you have not received a Second Notice of Citation, do not submit this form. You will receive a Second Notice of Citation in the mail providing you with your hearing date. Once you receive the Second Notice of Citation, you must appear in court, as scheduled, or your Answer (Dispute) will be stricken and a Default Judgment will be rendered against you.

- I am confirming my appearance in the Municipal Court and will appear on the date and time shown on my Second Notice of Citation. While I understand the City of Atlanta has the burden of proof in this case, it is my sole responsibility to subpoena any witness and bring to court any evidence in support of my case. I understand that once this dispute is filed, I will be required to personally appear in Court and the Court is not limited by any pre-posted or stipulated penalty.

Describe why you believe you should not have been cited: _____

Please use a separate sheet if more space is needed.

Under penalties of perjury, I declare that I have read the foregoing dispute form and that the facts stated in it are true. I also understand that the penalty for providing incorrect, false or misleading statements may lead to criminal prosecution.

Your signature

Date

Print your name

Your telephone number

Your email address

Your street address

City

State

Zip Code (Required)

(NOTARY STAMP)

SWORN before me this _____, 20_____.

Notary, State of Georgia

My Commission Expires

Mail this form to:

The Municipal Court of Atlanta
ATTN: Bus Stop Camera
150 Garnett Street SW
Atlanta, GA 30303

You may also submit this form in person at the court.