

State of West Virginia Uniform Citation NO: 100-1400044

The undersigned, being duly sworn, upon his oath deposes and says:

On _____ The _____ Day Of _____ At _____ Hours _____

Name: Last First Middle

Address: City: State: Zip Code:

Driver License Type: Driving License, ODL Level 1, GDL Level 3, CDL Instruction Permit, Motorcycle Instr Permit, Instruction Permit, GDL Level 2, CDL, Motorcycle Only, Other:

Driver License Number, State, Social Security Number, Date of Birth, Gender, Height, Eye Color, Class, Restrictions, Endorsements

License Plate Number, State, Plate Class, Vehicle Identification Number (VIN), Make, Year, Body Style, Model, Color

Owner / Lessee Name: Same as Violator, Address: City: State: Zip Code:

Commercial Motor Vehicle section with checkboxes for GVW Type, Vehicle Designated to Carry, etc.

In or Near: Highway Type, County, Route Number, Milepost, Municipality, Direction of Travel, GPS Coordinates, Street Name

Specific Reference / Landmark: In the Above Listed County or City of West Virginia, Did I Lawfully Then and There Commit the Following Offense(s): Charge #1, Charge #2

Agency, Detachment, or Unit Name, ORI #, Badge or ID #

Officer's Name (Please Print), Officer's Signature

VIOLATOR RESPONSIBILITY

I Understand that I Have to Appear, On or Before, (Date)

Court Name and Address, Court Phone

I Promise to Contact the Above Listed Court within the Time Specified. Failure to Appear Will Result in the Suspension of Driver's License. Violator Signature - Not an Admission of Guilt

FOR COURT USE ONLY section with charge disposition tables and signature line.

FOR DMV USE ONLY Court Code, Conviction Code 1, Conviction Code 2

COMPLAINT - AFFIDAVIT

State of West Virginia Uniform Citation NO: **100-1400044**

The undersigned, being duly sworn, upon his oath deposes and says:

On The Day Of At Hours
Weekday Date Month Year Time

Name: Last First Middle
Address:

City: State: Zip Code:

Driver License Type:

- Driving License
- GDL Level 1
- GDL Level 3
- CDL Instruction Permit
- Motorcycle Instr Permit
- Instruction Permit
- GDL Level 2
- CDL
- Motorcycle Only
- Other: _____

Driver License Number State Social Security Number Date of Birth
 Gender: M F Ft. In.
 M F Weight Height Eye Color Class Restrictions Endorsements

License Plate Number State Plate Class Vehicle Identification Number (VIN)

Make Year Body Style Model Color

Owner / Lessee Name: Same as Violator

Address: City: State: Zip Code:

Fatality **Complete Only for Commercial Motor Vehicles**
 CMV Type (Check 1): Veh Designed to Carry 16+ Passengers Haz Mat Other CMV

Coal Resource Transportation Sys. Permit #: _____
 DOT / Carrier # Bill of Lading Shipper ID #

In or Near:

Highway Type: Interstate County US City Street WV Other
 County Route Number Milepost Municipality Direction of Travel
 GPS Coordinate: Lat: Long:
 Street Name:

Specific Reference / Landmark:

In the Above Listed County or City of West Virginia, Did Unlawfully Then and There Commit the Following Offense(s):

Charge #1: (Select Only 1 Violation per Charge)
 Speeding _____ MPH in a _____ MPH Zone
 Other: _____
 In Violation of _____ WV State Code
 _____ Municipal Ordinance
Code or Ordinance Ref #

Charge #2: (Select Only 1 Violation per Charge)

 In Violation of _____ WV State Code
 _____ Municipal Ordinance
Code or Ordinance Ref #

Agency, Detachment, or Unit Name ORI # Badge or ID #

Officer's Name (Please Print) Officer's Signature

VIOLATOR RESPONSIBILITY

I Understand that I Have to Appear, On or Before, _____ (Date)

Court Name and Address Court Phone

I Promise to Contact the Above Listed Court within the Time Specified. Failure to Appear Will Result in the Suspension of Driver's License.

Violator Signature - Not an Admission of Guilt

OFFICER'S COPY