

## BOND/FINE/SANCTION SCHEDULE

Under Arizona Revised Statues §28-

§28 codes are reportable point violations and will be reported to the Arizona Motor Vehicle Department and transferred to participating states. If you were cited under §28, you will need to contact your home state MVD for further point information. If your violation is not listed below, you must contact the court prior to your appearance date.

\*Violation eligible for Defensive Driving Program

### VIOLATION CODE:

#### **FINE**

**28-702-01A** Waste of finite resources.....\$131.00  
65 MPH or Less in a 55 MPH Zone

**\*28-701A**  
**MPH OVER .....** **FINE**  
01-05.....\$204.00  
06-10.....\$218.00  
11-15.....\$229.00  
16-20.....\$253.00  
21-25.....\$283.00  
26-30.....\$318.00  
31-35.....\$352.00  
36 or more.....\$383.00

**\*28-702.01C**  
**MPH OVER .....** **FINE**  
66 to 70.....\$204.00  
71 to 75.....\$253.00  
76 to 80.....\$293.00  
81 to 85.....\$323.00  
86 to 90.....\$343.00  
91 to 95.....\$383.00  
96 to 100.....\$418.00  
101 or more.....\$462.00

**\*28-702.04B**  
**MPH OVER .....** **FINE**  
01-05.....\$204.00  
06-10.....\$218.00  
11-15.....\$239.00  
16-20.....\$253.00  
21-25.....\$293.00  
26-30.....\$323.00  
31-35.....\$352.00  
36-40.....\$383.00  
41-45.....\$418.00  
46 Or More.....\$462.00

**28-701.02A(2 or 3) .....** **FINE**  
21-25 over or 86-90 MPH.....\$293.00  
26-30 over or 91-95 MPH.....\$323.00  
31-35 over or 96-100 MPH.....\$343.00  
36-40 over .....\$378.00  
101-105 MPH.....\$383.00  
41-45.....\$418.00  
46 or more or 106 or more MPH.....\$462.00  
**\*28-701.02A (2 or 3) 15 MPH or less above the posted Speed limit**

<b>28-644.A1.....</b>	\$234.00
Disobey traffic control device	
<b>*28-644.A2.....</b>	\$254.00
Gore point violation	
<b>*28-647.1 .....</b>	\$234.00
Disobey flashing pedestrian signal	
<b>*28-651.....</b>	\$204.00
Use private property to avoid traffic control device	
<b>*28-704.A and C.....</b>	\$223.00
Impeding traffic	
<b>*28-721.A.....</b>	\$204.00
Driving on wrong side	
<b>*28-794 .....</b>	\$179.00
Failure to exercise due care	
<b>*28-797.F.....</b>	\$234.00
School zone violation	
<b>*28-851 .....</b>	\$288.00
Railroad stop violation	

### RESTRAINTS

#### **FINE**

<b>28-907A .....</b>	\$192.00
Fine suspended upon completion of Children Are Precious Passengers class or presentation of a child safety seat, call 928-679-7261 or 7262 for information.	
<b>28-909A1.A2 .....</b>	\$122.00

### REGISTRATION VIOLATIONS

#### **FINE**

<b>28-2532A.....</b>	\$633.00
With proof registration brought current after violation ...	\$195.00
Or dismissed with proof of registration valid on date and time of violation	
<b>28-2153A .....</b>	\$633.00
Or with proof of Registration.....	\$354.00
Or with proof covering date of violation.....	\$ 0.00
<b>28-2158C .....</b>	\$135.00
Or with proof of Registration.....	\$ 0.00
<b>28-4139A .....</b>	\$549.00
Or with proof from MVD that suspension has been lifted .....	\$170.00
Or dismissed with proof from MVD that suspension was an error.	

**Any other registration violations, contact court.**

### INSURANCE VIOLATIONS

**28-4135A, B or C** (first offense) carries a sanction of \$999.00 and **suspension of your driver's license for 6 months**. If you mail proof to the Court showing that the vehicle involved was insured on the date and time the complaint was issued, the charge will be dismissed.

If there was no insurance in effect at the time of your citation, you may have your sanction reduced to \$204.00 if you present proof of 6 months current insurance and a 39 month driving record from MVD. The proof you submit may be verified with your insurance company.

### DRIVER'S LICENSE VIOLATIONS

#### **FINE**

<b>28-3151 .....</b>	\$312.00
Or with proof of valid driver's license .....	\$195.00
With proof of valid driver's license on date of violation...\$ 0.00	
<b>28-3169 .....</b>	\$204.00
With proof of valid driver's license on date of violation...\$ 0.00	
<b>28-3478 .....</b>	\$412.00
<b>28-3474 or 28-3475 .....</b>	\$362.00

## FLAGSTAFF JUSTICE COURT

**200 N. SAN FRANCISCO ST.  
FLAGSTAFF, AZ. 86001  
928-679-7650**



The Flagstaff Justice Court is open for business Monday through Friday from 8:00am to 5:00pm. We are not open on weekends or holidays.

**If you are under the age of 18, you  
MUST appear in court with a parent  
or guardian.**

## OPTION 1

### ENROLL IN A TRAFFIC SAFETY COURSE

Flagstaff Justice Court accepts Defensive Driving classes for persons who receive tickets for certain minor traffic violations (see Bond/Fine/Sanction Schedule.)

#### **ADVANTAGES**

1. You will not need to go to Court
2. Your Ticket will be dismissed upon completion.
3. You will receive no points on your license.

#### **YOU MAY BE ELIGIBLE IF:**

1. You have not attended a traffic school for a ticket dismissal in the last two years (violation date to violation date)
2. Your violation is one that qualifies for traffic school. (See Bond/Fine/Sanction Schedule)
3. Your ticket did not result from an accident involving death or life-threatening injury.
4. Yours was not a minor traffic ticket given in addition to a major traffic ticket, such as DUI or Reckless Driving.
5. You have not already asked that your ticket be set for a hearing/trial.
6. You have a valid driver's license.
7. You were cited for one violation.
8. **If your driver license is not a Commercial Driver License (CDL).**

If you complete the Defensive Driving class within the required time frames, you will not have to appear at the court on that specific charge. Failure to complete this class within the time limits will result in a judgment against you and your license may be suspended. Your original fine will be reinstated along with an ADDITIONAL late fee charge of \$40.00 plus a \$20.00 Default fee.

**TRAFFIC SCHOOL INFORMATION**  
[www.azdrive.com](http://www.azdrive.com)  
 1-888-334-5565

**IF YOU ATTEND THE CLASS, YOU DO NOT HAVE TO APPEAR IN COURT, BUT YOU MUST LET THE COURT KNOW YOU ARE ATTENDING THE CLASS.**

## OPTION 2

### REQUEST A TRIAL/HEARING

1. READ and SIGN the following statement. *"I request a trial/hearing to contest the charges indicated below. I enter my plea of not guilty/responsible. I understand I am giving up my option of attending a Defensive Driving Program. I understand that I may voluntarily enclose a bond (cashier's check or money order) equal to the fine/sanction, which will be forfeited to the court should I fail to appear for my hearing/trial. I further understand that the bond forfeiture will relieve me of the possibility of the Court assessing additional monetary sanctions, issuing a suspension of my driver's license or issuing a warrant for my arrest or turning me over to a collection agency in the event that I fail to appear for trial/hearing."*

**Sign Here:** \_\_\_\_\_

2. You may post bond equal to the amount of your fine with a Cashier's Check or Money Order made payable to FLAGSTAFF JUSTICE COURT. (This will save you the \$40.00 late fee in the event you are found guilty/responsible and if the fine is not paid on the date of trial.) If you are found not guilty/not responsible, your bond will be returned to you.

**CHECK ONE:**  **BOND IS ENCLOSED**  
 **BOND IS NOT ENCLOSED**

3. Print the Following Information:

Violation Date: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone # \_\_\_\_\_

4. DETACH THIS PAGE. PLACE IT WITH YOUR BOND (CASHIER'S CHECK OR MONEY ORDER ONLY) AND A COPY OF YOUR CITATION IN THE ENVELOPE PROVIDED AND MAIL TO THE COURT.

5. **CHECK ONE:**  I will be represented by a lawyer  
 I will not be represented by a lawyer

6. Mail the envelope at least 5 working days before the court date. You will be notified by mail of the trial/hearing date. **YOU MUST APPEAR ON THAT DATE!** If you don't appear, you will be tried in absentia.

PURSUANT TO THE AMERICANS WITH DISABILITIES ACT (ADA), REQUESTS FOR REASONABLE ACCOMMODATION MUST BE MADE TO THE COURT AT LEAST THREE (3) DAYS PRIOR TO THE COURT DATE.

## OPTION 3

### PAY OBLIGATION BY MAIL

**READ and SIGN** the following statement: *"I waive my right to a trial/hearing and enter a plea of guilty/responsible to the charge(s) on my citation and consent to judgment imposing prescribed fines. I understand that a criminal traffic violation is a misdemeanor and will appear on my criminal history."*

**SIGN HERE:** \_\_\_\_\_

**WRITE** the COMPLAINT #, located at the top of the citation on this line: \_\_\_\_\_

**MATCH** the violation code(s) on the COMPLAINT to the codes listed on the Bond/Fine/Sanction schedule to determine the amount owed.

**NOTE: A \$40.00 mandated late fee will be assessed on all fines if not paid in full by the due date.**

Since you are paying by mail, this court goes by the postmark date. If your fine is postmarked by the due date, you do not need to enclose the late fee. **HOWEVER, if you are not paying your obligation in full, or if it is postmarked after the due date, you must include the \$40.00 late fee.**

## **IMPORTANT**

If you are pleading guilty to any criminal traffic charges, option 3 in its entirety, has to be filled out and signed. Your case will not be closed if this form is not completed. A Warrant for your arrest and/or suspension of your driver's license could be assessed.

**CHARGE #      I ENTER A PLEA OF:**

<b>RESPONSIBLE GUILTY</b>	<b>NOT RESPONSIBLE NOT GUILTY</b>	<b>FINE/BOND AMOUNT</b>
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A: <input type="checkbox"/>	<input type="checkbox"/>	_____
B: <input type="checkbox"/>	<input type="checkbox"/>	_____
C: <input type="checkbox"/>	<input type="checkbox"/>	_____
D: <input type="checkbox"/>	<input type="checkbox"/>	_____
E: <input type="checkbox"/>	<input type="checkbox"/>	_____

\$40.00 late fee (if applicable)	\$_____
<b>TOTAL</b>	\$_____

## METHOD OF PAYMENT:

### **CHECK OR MONEY ORDERS**

Mail to the court: 1) This document 2) a copy of the complaint, 3) check or money order made payable to Flagstaff Justice Court for the total amount of fines or bond. You may also pay by credit card:

#### **CARD TYPE: VISA or MASTERCARD**

Name as it appears on card \_\_\_\_\_

Credit  
Card# \_\_\_\_\_

Exp Date \_\_\_\_\_ Security code \_\_\_\_\_

Amount Authorized \$ \_\_\_\_\_

PRINT the following information

NAME \_\_\_\_\_ AS IT APPEARS ON CITATION

SIGNATURE \_\_\_\_\_

DOB \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

DAYTIME  
PHONE# \_\_\_\_\_

If you would like a receipt please enclose a self-addressed envelope.