

IN THE COUNTY COURT, SEVENTH JUDICIAL CIRCUIT,
IN AND FOR ST. JOHNS COUNTY, FLORIDA

STATE OF FLORIDA

Case # _____

v.

Citation: _____

DEFENDANT'S REQUEST FOR LATE DENIAL HEARING
180 days or Less from Offense date

I request a denial hearing at this late date. I did not comply with this request within the allotted time due to the following reasons:

DEFENDANT NAME: _____
MAILING ADDRESS: _____
CITY, STATE, ZIP: _____
DAYTIME PHONE #: _____

Under penalty of perjury, I hereby swear that the above information is true to the best of my knowledge and belief.

Due Date was: _____

Signature

Date

St Johns County Clerk of Courts
4010 Lewis Speedway
St. Augustine, Florida 32084
Traffic Number: (904)819-3628
Traffic Email: traffic@stjohnsclerk.com

Note: A late fee has been assessed along with your driving privilege being suspended. This office will issue clearance once late fees are paid.

