NAME, ADDRESS, AND TELEPHONE NUMBER OF DEFENDANT OR DEFENDANT'S ATTORNEY:	STATE BAR NUMBER	Reserved for Clerk's File Stamp
		1
ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, CO	OLINTY OF TEHAMA	-
COURTHOUSE ADDRESS:	OUNTI OF TEHAMA	-
DEFENDANT/PETITIONER:		
		OUTATION AND REPORT
☐ PETITION AND ORDER TO REDUCE OR ☐ PETITION AND ORDER FOR AN ABILITY		CITATION NUMBER/ LEA:
Petition to Reduce or Vacate Civil Assessment – California • If you have received a notice indicating that the cou	-	
hold on your license and/or a civil assessment has b		·
reduce or vacate the assessment.		
 To make the request, you must file a petition with t the California Rules of Court. You do not need to pay anything to file this petition 		e as defined in Section 4.106 of
Note: A petition to reduce or vacate an assessment		nt of hail fines nenalties
fees, or assessments unless specifically ordered by		nt or ban, mies, penances,
Petition for Ability-to-Pay Determination – California Rule		
 If you cannot pay your ticket, you may request that the court consider your ability to pay, lower your payment, vacate the amount you owe, get on a payment plan, and/or do community service (fees may apply). 		
You are eligible if: (1) you are currently on an installment plan or (2) your judgment remains unpaid, including when your		
case is delinquent or in collections.		
 You have the right to a review by a judicial officer. include a completed TR-320 form as well any addit 	· ·	
If an ability-to-pay determination has already occur		
penalties can be requested when there is a change	• • •	
Instructions: Complete and file this form and attach any		n you wish the court to
consider. (See Page 2 for more informatio	•	
Check one: ☐ This is my first petition ☐ I ha Reason for Petition/Change in circumstance:	ave submitted a petition before (Please ex	(plain below.)
☐ Additional sheets attached to		
this document.		
Reason you want to appear in court:		
☐ Additional sheets attached to this document.		
DECLARATION		
	ury, under the laws of the State of Califor ovided with this petition is true and corre	
Date:		
Petitioner's Name (PRINT)	Petitioner's Signature	

INFORMATION

- The court will respond to your petition in writing. Please allow up to four weeks for a response.
- If the court requires more information to make its determination, you will be notified in writing of the information needed or if necessary, a hearing date where you will be required to appear in court.

For Petition to Reduce or Vacate Civil Assessment:

Provide the reason(s) and documentation for your failure to appear on the due date.

For Petition for Ability-to-Pay Determination:

- Provide the reason(s) and any documentation to support your request, include a completed TR-320 form*.
- Provide any documentation to support your request, such as:
 - Proof of receiving any public benefits, such as CalWORKSs, General Relief, CalFresh (food stamps), IHSS, SSI, etc.
 - Any recent statements for fixed monthly payments (car, rent, utilities, credit card/student/personal loans, child support, etc.)
 - Pay stubs, disability/retirement income, or any other source of income
 - Bank statements, W-2's, and/or income tax returns
 - Work or family obligations or a disability that prevents you from completing community service

IMPORTANT: Once the judicial officer has made a ruling on your petition, the court will shred any additional documentation you submit with this petition. ORDER The Court has reviewed and considered the: \square Petition to Reduce or Vacate Civil Assessment. The court \square does \square does not find good cause for the failure to appear. ☐ Petition for Ability-to-Pay Determination. The Court Now Orders: ☐ Good Cause shown, the civil assessment is \$ total. ☐ Civil assessment is vacated and Count is dismissed. ☐ The court finds defendant Guilty on _____. The court finds defendant ☐ Not Guilty on _____. ☐ The court reduces the fine to \$______. Due by______. ☐ Withdrawn for collections. As to count(s): 1. ______ 3. _____ 4. _____ 5. ____. ____per month. ☐ It is determined that the defendant's ability to pay is \$ Collections vendor/court staff to set up a payment plan with the defendant. ☐ Defendant may complete community service in lieu of paying \$_______, by _______. ☐ Driver's license hold released for this citation. \square Sentence suspended. \square As to counts: ☐ Petition is denied. All previous orders remain in full force and effect. ☐ No further proceedings on this issue. ☐ Defendant has until to remit payment in full. ☐ Matter is ordered set for an **Ability-to-Pay** hearing by the Clerk's Office. Defendant ordered to appear as directed. More information is needed regarding **Judicial Officer** For Court Use Ability-to-Pay Hearing: Your court hearing has been set as follows: Date: Time: Dept.: Court Location: **PROOF OF SERVICE** I certify that I am not a party to this case and that I served a true copy of the Order upon the defendant/counsel at the address shown above, by placing it in a sealed envelope with postage fully paid for collection and mailing, by the United States Postal Service, at the courthouse in Red Bluff, California. **Kevin Harrigan, Court Executive Officer** , Deputy Clerk