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(216) 475-3087 (Fax)



5555 Turney Road, Garfield Heights, OH 44125



# Garfield Heights Municipal Court

**30  
Days**

**You have been issued a civil traffic ticket. In the next 30 days you must do one of following actions.**

**Your Name** \_\_\_\_\_

**Ticket No.** \_\_\_\_\_

*Failure to act will constitute an admission of liability, waiver of all rights to contest the violation, and a civil judgment will be entered against you.*

## Option 1 – Pay It



*You will not have points on your license, and the ticket is not reported to the Ohio BMV.*

**See reverse side for payment methods.**

**Do not send cash.**

## Option 2 – File an Affidavit



*File electronically at the link above or mail this affidavit, with any police report regarding stolen vehicle or license plate to the address above. The affidavit must raise one of the defenses listed below.*

## Option 3 – Request a Hearing



*The registered owner or designated party may contest the ticket by filing this request for hearing with the Garfield Heights Municipal Court. File this form online, via fax, or by mail to the address above.*



## File an Affidavit

Check **one** box only  
(Please print clearly.)



**Must be Notarized or will not be valid**



### ☐ Other Driver

*My motor vehicle was in the care, custody, or control of another person. The registered owner must identify that person as a designated party below who may be held liable for the violation.*



### ☐ Rented Vehicle

*The vehicle was leased or rented at the time of the traffic law violation. The vehicle leasing/renting dealer must identify the name and address of the lessee/renter of the vehicle at the time of the violation.*



### ☐ Commercial Vehicle

*The vehicle is a commercial motor vehicle or the ticket was issued to a corporate entity. Agent of the corporate entity must identify the name and address of the person who was operating the motor vehicle at the time of the violation.*



### ☐ Stolen Vehicle

*The motor vehicle or the license plates were stolen and were not under the control or possession of the owner at the time to the violation.*



**If Stolen, Name of Police Department and Police Report Number:**

\_\_\_\_\_  
*Must attach police report to this form.*

**Driver Name** \_\_\_\_\_ **Driver Address** \_\_\_\_\_

**Citation Number** \_\_\_\_\_

**Name of Individual Cited or Agent of Corporate Entity filing this Affidavit (if applicable)** \_\_\_\_\_

*I declare under penalty of perjury that the foregoing information (and any documentation in support of my defense) is true and accurate to the best of my knowledge.*

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**State of** \_\_\_\_\_ **County of** \_\_\_\_\_ **Email** \_\_\_\_\_

**Sworn to or affirmed and subscribed before me by** \_\_\_\_\_ **on this date of** \_\_\_\_\_

**Signature of Notary Public Commission** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_ **(Notary Seal)**



## Request a Hearing

*The Registered owner or above designated party may contest the ticket by filing this request for hearing with the Garfield Heights Municipal Court. File this form online, via fax, or at the address above. The court will email you a hearing notice if you provide an email address. (Must provide the information below and print clearly.)*

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_

**Citation Number** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Text Number** \_\_\_\_\_ **Telephone Number** \_\_\_\_\_