



TYPE OR PRINT LEGIBLY IN BLACK INK. DO NOT WRITE IN SHADED AREAS.

COURT ACTION REPORT

DEFENDANT	NAME: FIRST MIDDLE LAST			RACE	SEX	DATE OF BIRTH		SOCIAL SECURITY NUMBER				
	ADDRESS (NO., STREET, APT., OR RT. AND BOX NO.)				CITY			STATE	ZIP CODE			
	DRIVER LICENSE NUMBER		CLASS	STATE	LIC. PLATE NO.		STATE	YR	VEH YR	VEH MAKE	VEH MODEL	
	ASSIGNED NO. HISTORY ONLY			COMMERCIAL MOTOR VEH. <input type="checkbox"/> YES <input type="checkbox"/> NO		HAZARDOUS MATERIALS <input type="checkbox"/> YES <input type="checkbox"/> NO		ACCIDENT <input type="checkbox"/> YES <input type="checkbox"/> NO		CDL <input type="checkbox"/> YES <input type="checkbox"/> NO		
VIOLATION	VIO. DATE		COUNTY		CODE	STREET/HIGHWAY			AGENCY			
	1 CITATION NO.		DESCRIPTION OF VIOLATION				SPEED MPH		ZONE	DUI OFFENSE 1ST 2ND 3RD		
	OTHER COURT ORDERED RESTRICTIONS											
	HEARING DATE		COURT DOCKET NO.		CASE DISPOSITION: (CHECK ONLY THE ONE APPROPRIATE BOX) <input type="checkbox"/> GUILTY AS CHARGED <input type="checkbox"/> REDUCED - GUILTY OF <input type="checkbox"/> DISMISSED <input type="checkbox"/> FAILED TO APPEAR - INITIATE SUSPENSION (LIST CONVICTION) <input type="checkbox"/> DEFAULTED ON T.C.A. 55-50-502(j)-COMPLIANT PAYMENT PLAN TO PAY FINES/COSTS AFTER CONVICTION - INITIATE SUSPENSION; DEFAULT DATE SENT IN ERROR							
OFFENSE	TRAFFIC SCHOOL <input type="checkbox"/> YES <input type="checkbox"/> NO		DATE COMPLETED									
	REMARKS											
	FINE		COSTS		OTHER		TOTAL ASSESSED		PAID IN FULL <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PAYMENT PLAN <input type="checkbox"/> WAIVED/INDIGENT		TN LICENSE SEIZED <input type="checkbox"/> YES <input type="checkbox"/> NO	
	VIO. CODE		BAT CODE		FTA CODE		FINE CODE		LIC. SURR CODE		REVOKE/SUSPEND → BEGIN ELIGIBLE	
ALTA	2 CITATION NO.		DESCRIPTION OF VIOLATION				SPEED MPH		ZONE	DUI OFFENSE 1ST 2ND 3RD		
	OTHER COURT ORDERED RESTRICTIONS											
	HEARING DATE		COURT DOCKET NO.		CASE DISPOSITION: (CHECK ONLY THE ONE APPROPRIATE BOX) <input type="checkbox"/> GUILTY AS CHARGED <input type="checkbox"/> REDUCED - GUILTY OF <input type="checkbox"/> DISMISSED <input type="checkbox"/> FAILED TO APPEAR - INITIATE SUSPENSION (LIST CONVICTION) <input type="checkbox"/> DEFAULTED ON T.C.A. 55-50-502(j)-COMPLIANT PAYMENT PLAN TO PAY FINES/COSTS AFTER CONVICTION - INITIATE SUSPENSION; DEFAULT DATE SENT IN ERROR							
	TRAFFIC SCHOOL <input type="checkbox"/> YES <input type="checkbox"/> NO		DATE COMPLETED									
IN	FINE		COSTS		OTHER		TOTAL ASSESSED		PAID IN FULL <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PAYMENT PLAN <input type="checkbox"/> WAIVED/INDIGENT		TN LICENSE SEIZED <input type="checkbox"/> YES <input type="checkbox"/> NO	
	VIO. CODE		BAT CODE		FTA CODE		FINE CODE		LIC. SURR CODE		REVOKE/SUSPEND → BEGIN ELIGIBLE	
	3 CITATION NO.		DESCRIPTION OF VIOLATION				SPEED MPH		ZONE	DUI OFFENSE 1ST 2ND 3RD		
	OTHER COURT ORDERED RESTRICTIONS											
S	HEARING DATE		COURT DOCKET NO.		CASE DISPOSITION: (CHECK ONLY THE ONE APPROPRIATE BOX) <input type="checkbox"/> GUILTY AS CHARGED <input type="checkbox"/> REDUCED - GUILTY OF <input type="checkbox"/> DISMISSED <input type="checkbox"/> FAILED TO APPEAR - INITIATE SUSPENSION (LIST CONVICTION) <input type="checkbox"/> DEFAULTED ON T.C.A. 55-50-502(j)-COMPLIANT PAYMENT PLAN TO PAY FINES/COSTS AFTER CONVICTION - INITIATE SUSPENSION; DEFAULT DATE SENT IN ERROR							
	TRAFFIC SCHOOL <input type="checkbox"/> YES <input type="checkbox"/> NO		DATE COMPLETED									
	REMARKS											
	FINE		COSTS		OTHER		TOTAL ASSESSED		PAID IN FULL <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PAYMENT PLAN <input type="checkbox"/> WAIVED/INDIGENT		TN LICENSE SEIZED <input type="checkbox"/> YES <input type="checkbox"/> NO	
COURT	VIO. CODE		BAT CODE		FTA CODE		FINE CODE		LIC. SURR CODE		REVOKE/SUSPEND → BEGIN ELIGIBLE	
	NAME OF COURT				CORRECTED/AMENDED ABSTRACT? <input type="checkbox"/> YES, EXPLAIN CORRECTION BELOW: STAPLE COPY OF ORIGINAL DOCUMENT SUBMITTED.							
	COURT MAILING ADDRESS											
	CITY				STATE	ZIP CODE						
COURT	COURT ID NO.				TELEPHONE NUMBER (AREA CODE)				<input type="checkbox"/> CITATION SATISFIED 392 <input type="checkbox"/> FINES & COSTS ON MANDATORY PAID 277			
	THIS IS A TRUE AND CORRECT ABSTRACT.								<input type="checkbox"/> 18-20 ALCOHOL SUSPENSION MAY BE WITHDRAWN			
	JUDGE/CLERK SIGNATURE				REPORT DATE				JUDGE/CLERK SIGNATURE			
									WITHDRAW DATE			

DIRECTIONS FOR CLERKS AND DEFENDANTS

CLERKS

1. Use this form for reporting all court actions to the Tennessee Department of Safety and Homeland Security. These actions include:
 - a) Convictions of traffic or traffic related offenses which are required by law to be reported (T.C.A. 55-10-306);
 - b) Failure to appear on said traffic related offenses, or defaulted on T.C.A. 55-50-502(j)-compliant payment plan to pay fines and costs after conviction (no action can be taken on non-traffic violations);
 - c) Certification of payment of fines and costs when drivers are convicted of mandatory revocation or suspension offenses if not previously notified on original abstract;
 - d) Notification when citations are satisfied or fines and costs have been paid if not previously notified on original abstract;
 - e) Notification of withdrawal on "18-20 Alcohol Violations";
 - f) Corrected or amended abstracts; or
 - g) Report completion of court ordered traffic school.
2. Send original directly to the Department of Safety and Homeland Security when reporting convictions, failures to appear, defaults on T.C.A. 55-50-502(j)-compliant payment plan to pay fines/costs after conviction, and corrected or amended abstracts. If the court is sending in a failure to appear or a default on T.C.A. 55-50-502(j)-compliant payment plan to pay fines and costs after conviction to initiate suspension of the defendant's license, the court may wish to notify the defendant that this process has been initiated by the court.
3. Make a copy of the completed form and retain for court records.
4. Forward a copy to the Department to report satisfied citation(s) or for "18-20 Alcohol Violation" withdrawal.
5. Provide a copy to the defendant when citations(s) are satisfied or other withdrawals are ordered.
6. Send completed copies of the form directly to:

**TICKET EVALUATION UNIT
DEPARTMENT OF SAFETY AND HOMELAND SECURITY
P.O. BOX 945
NASHVILLE, TN 37202**

OUT-OF-STATE DRIVERS

1. Any conviction or failure to satisfy a ticket has been forwarded to your home state. You should forward a copy of this form to the licensing authorities in your home state. In addition, if the violation required a mandatory revocation or suspension, then action may have been taken against your driving privileges in the State of Tennessee. If you were convicted of any of the following violations you are required to submit this form to the Tennessee Department of Safety and Homeland Security along with any other requirements: driving while intoxicated, manslaughter, vehicular homicide, driving on revoked or suspended license, drag racing, violation of restricted license, leaving the scene of an accident, unlawful use of driver license, committing a felony with an automobile, allowing an intoxicated person to drive, driving while impaired, theft of a motor vehicle or part thereof, child endangerment by driving while intoxicated, and the drug free youth act, 18-20 year old alcoholic beverage violation, or juvenile possession of weapon if suspension period expired and withdrawal order not submitted.

ALL DRIVERS

If you are convicted of an offense requiring revocation or suspension of your driving privileges, such as driving while intoxicated, driving while revoked or suspended, failure to show liability insurance, refusal to take blood/alcohol test, etc., your privilege to drive in Tennessee will be revoked or suspended.

GENERAL INFORMATION TO DRIVERS

1. All telephone inquiries should be made to the Financial Responsibility Section at (866) 903-7357.
2. All forms, compliances, or written correspondence should be mailed to:

**FINANCIAL RESPONSIBILITY SECTION
DEPARTMENT OF SAFETY AND HOMELAND SECURITY
P.O. BOX 945
NASHVILLE, TN 37202**