MARYLAND UNIFORM COMPLAINT / CITATION / SUMMONS 1114B56	DISTRICT COURT OF MARYLAND SUMMONS TO APPEAR / NOTICE TO DEFENDANT	
DRIVER'S LICENSE NUMBER CLASS STATE	IMPORTANT INFORMATION: This citation is a summons to appear. If you request a trial or waiver hearing, you will be notified by	
DEFENDANT'S (FIRST) NAME MIDDLE LAST SUFFIX	the Circuit or District Court through a trial/waiver hearing notice setting the date, time, and place to appear. It is your obligation to	
	know your trial/hearing date and appear on that date. It may take several weeks before a trial/hearing date is set. If your name or address on this citation is not correct, you must notify the Court in writing of any changes. The Post Office does NOT forward Court mail.	
CURRENT ADDRESS IN FULL	IF ANY OF YOUR VIOLATIONS ARE MARKED "MUST APPEAR": You must appear in District Court as directed. You will automatically be mailed a notice of your trial date by the Court. Failure to appear may result in a warrant for your arrest.	
CITY COUNTY STATE ZIP CODE	TO THE PERSON CHARGED:	by the Court. Failure to appear may result in a warrant for your arrest.
	1. This paper charges you with committing a crime.	
HEIGHT WEIGHT RACE GENDER BIRTH DATE TELEPHONE NO.	from jail until your trial	ave the right to have a judicial officer decide whether you should be released
	3. If you have been served with a citation or summons directly a served with a citation or summons directly a served with a serv	ecting you to appear before a judicial officer for a preliminary inquiry at a date
VEHICLE REGISTRATION STATE YEAR	<ul> <li>and time designated or within five days of service if no i against you, and penalties. The preliminary inquiry will</li> <li>You have the right to have a lawyer.</li> </ul>	ecting you to appear before a judicial officer for a preliminary inquiry at a date time is designated a judicial officer will advise you of your rights, the charges be cancelled if a lawyer has entered an appearance to represent you.
MAKE MODEL TYPE COLOR	5. A lawyer can be helpful to you by:	FOR MORE INFORMATION AND TO PAY CITATIONS
	<ul><li>(A) explaining the charges in this paper;</li><li>(B) telling you the possible penalties;</li></ul>	Visit the MD Judiciary Website at www.mdcourts.gov/district or
	<ul> <li>(C) explaining any potential collateral consequences conviction, including immigration consequences</li> </ul>	of a call the Interactive Voice Response (IVR) System
CDL (LICENSE) FATAL ACC. A/R SUSP. REV.	(D) helping you at trial;	
LOCATION OF OFFENSE	(E) helping you protect your constitutional rights; and	From all areas including out-of-state call: 1-800-492-2656
COUNTY/ CODE AREA ARREST TYPE CVID	<ul><li>(F) helping you get a fair penalty if convicted</li><li>6. Even if you plan to plead guilty, a lawyer can be helpful</li></ul>	TTY users call Maryland RELAY: 711
MD	7. If you are eligible, the Public Defender or a court-appoint	attorney will represent you at any initial appearance before a judicial officer
DID UNLAWFULLY VIOLATE MOTOR VEHICLE LAW(S):	and at any proceeding under Rule 4-216.1 to review an	order of a District Court commissioner regarding pretrial release.
CITATION NO. ART/SEC/CHARGE PAYABLE FINE AMOUNT	If you want a lawyer for any further proceeding includin a lawyer for you. The court clerk will tell you how to con	g trial, but do not have the money to hire one, the Public Defender may provide
1. 1114B56 TA-21-902(a)(1)		blic Defender will not provide one for you, contact the court clerk as soon as
	possible.	
	9. DO NOT WAIT UNTIL THE DATE OF YOUR TRIAL TO have to go to trial without one	) GET A LAWYER. If you do not have a lawyer before the trial date, you may
		ABLE FINE": You must comply with one of the following within 30 days
	after receipt of the citation. Provide any change of a	ddress if applicable.
2. 1124B56     TA-21-801.1     PAYABLE FINE       EXCEEDING MAXIMUM SPEED     MUST APPEAR     \$ 290		<b>ne for each violation within 30 days</b> at any District Court of Maryland, by mail, e Court Website. If paying by mail, make check or money order payable to
MUST APPEAR \$ 290	District Court of MD and include citation number(s) on fr	ont of check or money order. On the option form below, check "Pay Fine
	Amount" for each violation being paid and mail the form	with your payment to the address shown for the District Court of MD.
	An additional \$10 service fee will be imposed for each d	ISNONORED CHECK. RDING SENTENCING AND DISPOSITION INSTEAD OF A TRIAL: On the
3. 1134B56 TA-16-112(c) PAYABLE FINE C 40		each violation where hearing is requested, sign, date at the bottom and mail the
FAILURE OF INDIVIDUAL DRIVING ON THIST ADDEAD \$ 40	form within 30 days to the address shown below. DO NO	
HIGHWAY TO DISPLAY LICENSE TO	<b>PTION #3 - REQUEST TRIAL:</b> On the option form below, check "Request Trial" for each violation where Trial is requested, sign, date at the pottom and mail the form within 30 days to the address shown below. DO NOT SEND PAYMENT at this time.	
	<b></b>	RYLAND COMPLAINT AND CITATION OPTION FORM
		NAME         (Auto Populated)         DISTRICT/NO.         Populated/Populated
4. 1144B56 TA-27-105 EXCEEDING REGISTERED WEIGHT LIMIT	Return to: District Court of MD	Check if change from address on citation.
	P.O. Box 6676	ADDRESS
LBS. OVERWEIGHT PERMITTED WEIGHT	Annapolis, MD 21401-0676	CITY, STATE, ZIP
		TELEPHONE NO.
I SOLEMNLY AFFIRM UNDER PENALTY OF PERJURY THAT THE CONTENT OF THE FOREGOING DOCUMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF AND I PERSONALLY SERVED THIS SUMMONS ON THE	(Auto Populated)	YOU MUST APPEAR
DEFENDANT NAMED ABOVE.	(Auto Populated)	
DISTRICT NO. AGENCY SUB-AGENCY ID NO.	(Auto Populated)	PAY FINE AMOUNT \$ 40 OR REQUEST TRIAL
RADAR/LASER/VASCAR OPERATOR	(Auto Populated)	PAY FINE AMOUNT \$ 86 OR REQUEST WAIVER HEARING REQUEST TRIAL
AGENCY SUB-AGENCY ID NO.	Check the appropriate box and sign below to request a Waiver Hearing or Trial for any citations listed above	
I ACKNOWLEDGE RECEIPT OF A COPY OF THIS SUMMONS. I UNDERSTAND THAT	<b>Request Waiver Hearing</b> - I admit that I committed the violation(s) charged in this citation. I am	
I ACKNOWLEDGE RECEIPT OF A COPY OF THIS SUMMONS. I UNDERSTAND THAT ACCEPTANCE OF THIS SUMMONS IS NOT AN ADMISSION OF GUILT BUT MY FAILURE TO APPEAR MAY RESULT IN THE ISSUANCE OF A WARRANT FOR MY ARREST. ISSUED ELECTRONICALLY - SIGNATURE NOT REQUIRED	requesting a waiver hearing at which I may explain the circumstances to a judge. I know this is not a trial, the officer and witnesses will not be present, and that my appearance in court is for sentencing only.	
NOTE: Failing to comply with option 1, 2, or 3 or failing to appear for a		
scheduled trial/waiver hearing will result in the suspension of your license and privilege to drive by the Motor Vehicle Administration. Driving on a suspended	<b>Request Trial</b> - I request a trial date for the violation(s) charged.	
license is a criminal offense for which you may be incarcerated.	]	