MASSACHUSETTS UNIFORM CITATION

VIOLATOR COPY

DATE WRITTEN (MM/DD/YY)	AGENCY CODE	OFFICER I.D. NUMBER	COURT CODE	TYPE OF CITATION	
				☐ OPERATOR ☐ OWNER ☐ PASSENGER ☐ BICYCLIST	R

VIOLATOR

MOTOR VEHICLE LICENSE NO. OF VIOLATOR	STATE	CLASS	CDL LICENSE	RACE	SEX	NON-INVENTORY MV SEARCH
			☐ YES ☐ NO			☐ YES ☐ NO CODE

VIOLATOR NAME (Last)	(First)	(Initial)	BIRTH DATE (MM/DD/YY)

ADDRESS	CITY / TOWN	STATE	ZIP

MV

PLATE TYPE	VEHICLE REGISTRATION NO.	STATE	YEAR	MAKE AND TYPE	COLOR	CDL VEHICLE	16+ PASSENGERS	PLACARDED HAZMAT
						☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO

OFFENSE(S)

OFFENSE DATE (MM/DD/YY)	LOCATION OF OFFENSE (include #, st, hwy, city or town)	TIME OF OFFENSE ☐ AM ☐ PM	CRASH ☐ YES ☐ NO

	CHAP / SEC / SUB		DESCRIPTION OF OFFENSE	ASSESSMENT
A.		☐ CRIM ☐ CIVIL		$
B.		☐ CRIM ☐ CIVIL		$
C.		☐ CRIM ☐ CIVIL		$
D. SPEEDING ☐ 90/17 ☐ 90/18		CIVIL	MPH IN A _____ MPH ZONE _____ ☐ POSTED ☐ NOT POSTED ☐ LIDAR ☐ CLOCKED ☐ RADAR ☐ ESTIMATED	$

SPEEDING ASSESSMENTS INCLUDE A $50 HEAD INJURY SURCHARGE

TOTAL DUE $

OFFICER CHECK ONE ONLY ☐ **ALL CIVIL INFRACTIONS** (See instruction A on back) ☐ **CRIMINAL APPLICATION** (See instruction B on back) ☐ **ARREST** ☐ **WARNING** (No action required)

OFFICER CERTIFIES ☐ IN HAND TO VIOL. ☐ MAILED TO VIOL. ☐ IN HAND TO VIOLATOR'S AGENT

X

AGENT NAME

VIOLATOR / AGENT ACKNOWLEDGES RECEIPT OF CITATION

X

AGENT'S LICENSE NUMBER & STATE

NOTICE TO VIOLATOR
SEE REVERSE SIDE FOR INSTRUCTIONS

NOTICE TO OFFICER
ENTER ASSESSMENT $ AND TOTAL DUE $ ONLY IF YOU CHECK "ALL CIVIL INFRACTIONS". ENTER COURT ADDRESS BELOW ONLY IF YOU CHECK "CRIMINAL APPLICATION".

COURT ADDRESS

Sample

recyclable