

# UNDERSTANDING YOUR CITATION

**STATE OF NEVADA**  
Nevada Highway Patrol

**COURT**  
LAS VEGAS MUNICIPAL COURT  
County: CLARK      Case #      Type: TRAFFIC  
Issue Date/Time: 08/23/2021 0854      Violation Date/Time: 08/23/2021 0850

**LOCATION**  
Location: US95      Direction: S  
EASTERN      Ped Safety Zone: No

School Zone: No      Accident: No  
Const Zone: No      Evidence: No

**VIOLATOR**  
Name: TESTRECORD, IMA  
Address: 123 SOMEWHERE IN  
City: LAS VEGAS      State: NV      Phone:      Zip: 89120  
Hgt: 507      Wgt: 165      Hair: BRO      Eyes: BRO      Race: W      Sex: F  
DL #: 0200000000      DL Expires:      CDL: No  
DL State: NV      Class: C      DOB: 09/09/1954  
Restrictions:      Compliant?:

Endorsements:

Other Contact: Business -  
Address:      State: NV      2nd Phone:      Zip:      City:

**VEHICLE**  
VIN #: VINTESTRECORD1234      Type: SEDAN      State: NV  
Make: PONTIAC      Lic Plate: TESTPLY      Haz Mat: No  
Model: GRAND AM      Veh Yr: 2003      Comm Veh: No  
Color: WHITE      DOT #:      Reg Exp: 12/31/2021

Owner: TESTRECORD, IMA      Ins Exp:      Ins Valid:  
Address: 123 SOMEWHERE IN, LAS VEGAS, NV 89120

**VIOLATION(S)**      Spd Det:      Posted: 65 MPH  
Actual: 90 MPH  
Cited: 90 MPH

Violation 1- 484B.600 1010 NOC: 53849  
Desc: Basic Speed 1-10 Over Limit

90 IN A 65

Bail: Crt Req Admin: Crt Req Court Facility: Crt Req Sp Ct Fee: Crt Req  
Total: Crt Req

I declare under penalty of perjury, that defendant unlawfully committed the above offense(s).

Trooper Signature      Complainant Signature

YOU ARE HEREBY SUMMONED TO APPEAR IN PERSON OR POST BAIL IN:  
LAS VEGAS MUNICIPAL COURT  
Physical: 100 E. Clark Ave Las Vegas, NV 89101  
Mailing Address: PO Box 3950; Las Vegas, NV 89127

<http://www.LasVegasNevada.gov/MunicipalCourt>

Phone: 702-382-6878

**PAY OR APPEAR ON OR BEFORE (Court Date): 10/07/2021  
AT: 0800**

Without admitting having committed the above offense(s), I hereby promise to respond as directed on this notice and waive my right to be taken immediately before a magistrate (NRS 484A.630 and NRS 484A.750)

CITATION ISSUING AGENCY

CITATION OR CASE NUMBER

VIOLATION DATE

VIOLATION CODE

VIOLATION DESCRIPTION

WHICH COURT YOUR  
CITATION WILL BE  
FILED WITH.

# CITY OF LAS VEGAS MUNICIPAL COURT

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STATE OF NEVADA  
Las Vegas Metro Police Department

In the Justice/Municipal Court:  
**LAS VEGAS JUSTICE**

County: **CLARK**

Issue Date/Time: **8/2/2017 0813**

Violation Date/Time: **8/2/2017 0810**

Citation # **LVM0211007**

Case # **17080200**

Type: **TRAFFIC**

☐ Juvenile

**LOCATION AND VIOLATION INFORMATION**

Location: **AGAVE SHADOW CT and E OF DESERT CLIFF ST**

Sector: **Weather: Clear**

Direction: **S**

Traffic Light: **Red**

Road Cond: **Dry**

Cited: **Actual: School Zone: No Arrest: No Grant: \*NONE**

Posted: **Confirm: Construction Zone WP: No Accident: No**

**VIOLATOR / DRIVER**

Name: **TEST, TEST R**

Address: **9101 W SAHARA AVE STE 101 F-25** City: **LAS VEGAS** State: **NV** Zip: **89117**

Hgt: **509** Wgt: **150** Sex: **M** Hair: **BRO** Eyes: **BRO** Race: **W** DOB: **12/10/1982** Phone:

Employer: **Business -**

Address:  City:  State: **NV** Zip:

Phn 1:  Phn 2:

DL #: **123456778** DL State: **NV** CDL: **No** Class: **C** DL Expires: **12/10/2012**

Restrictions: **None-No** Endorsement:

**VEHICLE** Did operate the following vehicle:

VIN #: **AZ34RT5678934R56** Model: **ACCORD** Type:  State: **NV**

Make: **HOND** Color: **BURGUNDY/MARO** Veh Tag: **ABC123** Haz Mat: **No**

DOT #:  Reg Exp: **02/02/2010** Veh Yr: **2000** CMV: **No**

Owner: **USER, JOE** Num Occ:

Address: **111 TRADE WAY, CARSON CITY, NV 89701**

**VIOLATIONS** Did then and there commit the following offense(s):

**VIOLATION 1 - CITATION - 486.061.1 - 1.00 - NOC: 54105 1.08.010 10.02.010**

**Drive Motorcycle W/O Valid MOTORCYCLE License/Permit**

I certify (or declare) under penalty of perjury under the laws of the state of Nevada that I have reasonable grounds/probable cause to believe and do believe that above named person committed the above offense(s) contrary to law.

Deputy's Signature:  Complainant's Signature:  Defendant's Signature:

OFFICER Mondragon ID# 7780 Citizen:  Addr:  City:  State: **NV** Zip:

This is not a plea of guilty. (Not valid if unsigned)

Failure to comply with this complaint or future dates relating to this complaint will constitute a separate offense

Interpreter Needed: **\*NONE** Court Mandatory: **NO**

Without admitting having committed the above offense(s), I hereby promise to respond as directed on this notice and waive my right to be taken immediately before a magistrate (NRS 484.799 and NRS 484.803)

You are hereby ordered to appear to answer to the above charges on the day and time:

**LAS VEGAS JUSTICE COURT**

Physical: **200 Lewis Avenue First Floor, Las Vegas, NV 89101**

Mailing: **Same as Physical**

702-671-3444

<http://www.lasvegasjusticecourt.us/>

Appear On: **9/18/2017**

At: **0800 HRS**

# CITY OF LAS VEGAS MUNICIPAL COURT

# UNDERSTANDING YOUR CITATION

**COURT**  
LAS VEGAS MUNICIPAL COURT

**County:** CLARK **Case #** **Type:** TRAFFIC  
**Issue Date/Time:** 09/03/2015 0948 **Violation Date/Time:** 09/03/2015 0932

**LOCATION**  
**Location:** US85  
8 OF VALLEY VIEW **Direction:** N

**School Zone:** No **Accident:** No  
**Const Zone:** No **Evidence:** No

**VIOLATOR**  
**Name:** DOE, JANE **Phone:**  
**Address:** 4615 W SUNSET RD **City:** LAS VEGAS **State:** NV **Zip:** 89118  
**Hgt:** 504 **Wgt:** 125 **Hair:** BLN **Eyes:** GRN **Race:** W **Sex:** F  
**DL #:** 12345678910 **DL Expires:** 06/17/2022 **CDL No:**  
**DL State:** NV **Class:** C **DOB:** 08/17/1988  
**Restrictions:** Corrective Lenses **Compliant?** YES

**Endorsements:** None/Not Applicable  
**Other Contact:** Business  
**Address:** **City:** **State:** NV **2nd Phone:** **Zip:**

**VEHICLE**  
**VIN #:** **Type:** SEDAN 2-DOOR **State:** NV  
**Make:** MERCEDES-BENZ **Lic Plate:** 000ABC **Haz Mat:** No  
**Model:** S-CLASS **Veh Yr:** 2012 **Comm Veh:** No  
**Color:** BLACK **DOT #:** **Reg Exp:** 08/17/16  
**Owner:** DOE, JANE **Ins Exp:** **Ins Valid:**  
**Address:** 4615 W SUNSET RD, LAS VEGAS, NV 89118

**VIOLATION(S)** **Spd Det:** PACED **Posted:** 65 MPH  
**Actual:** 80 MPH **Cited:** 80 MPH

**Violation 1- 484B.600 1018 NOC: 53853**  
**Desc:** Basic Speed 11 20 Over Limit

**VISUALLY ESTIMATED BLACK MERCEDES TRAVELING IN EXCESS OF 80MPH IN A 65MPH ZONE FOR PACED FOR 1/4 MILE IN THE HOV LANE.**

**Bail:** Cr Req Admin Cr Req Court Facility Cr Req Sp Ct Fee Cr Req Total Cr Req

**Violation 2- 484B.323 1018 NOC: 53800**  
**Desc:** Violation Of HoV/Carpool Lane Regulations

**BLACK MERCEDES SINGLE OCCUPANT IN HOV LANE DURING RESTRICTED HOURS 0600-1000 MON-FRI.**

**Bail:** Cr Req Admin Cr Req Court Facility Cr Req Sp Ct Fee Cr Req Total Cr Req

**Violation 3- 485.185 1018 NOC: 54064**  
**Desc:** Proof Of Insurance Required

**NO INSURANCE WAS PROVIDED BY DRIVER, RC, UPON COMMAND**

**Bail:** Cr Req Admin Cr Req Court Facility Cr Req Sp Ct Fee Cr Req Total Cr Req

**Violation 4- 484D.125 1018 NOC 54008**  
**Desc:** Stop Lamps Required

**LEFT BRAKE LIGHT OUT, NEEDS TO BE REPLACED**

**Bail:** Cr Req Admin Cr Req Court Facility Cr Req Sp Ct Fee Cr Req Total Cr Req

I declare under penalty of perjury, that defendant unlawfully committed the above offense(s).

**Trooper Signature** **Complainant Signature**  
*James* 9/87

**YOU ARE HEREBY SUMMONED TO APPEAR IN PERSON OR POST BAIL IN**  
**LAS VEGAS MUNICIPAL COURT**  
**Physical:** 100 E.Clark Avenue; Las Vegas, NV  
**89101 Mailing:** PO Box 3950; Las Vegas, NV 89127  
**Phone:** 702-382-6878  
**http://www.lasvegasnevada.gov/Pay/18916.htm**

CITATION OR CASE NUMBER

VIOLATION DATE

VIOLATION CODE

VIOLATION DESCRIPTION

INFORMATION ON THE BACK OF THE CITATION IS **COURT SPECIFIC**, SO PLEASE READ CAREFULLY.

WHICH COURT YOUR CITATION WILL BE FILED WITH.

# UNDERSTANDING YOUR CITATION

<input type="checkbox"/> In the Municipal Court of <input type="checkbox"/> In the Justice Court of Clark County Court Case #		<b>State of Nevada</b> <b>CLARK COUNTY</b> Las Vegas Metropolitan Police Department		<b>COURT</b> Event #: ID #: <input type="checkbox"/> Injuries <input type="checkbox"/> Crime Report <input type="checkbox"/> Officer's Report <input type="checkbox"/> Evidence Logged <input type="checkbox"/> Arrest <input type="checkbox"/> Aircraft Clock Number <input type="checkbox"/> Radar <input type="checkbox"/> Other Explain:		<b>CITATION ISSUING AGENCY</b>
<input type="checkbox"/> <b>Adult</b> <input type="checkbox"/> <b>Juvenile</b> <input type="checkbox"/> Traffic <input type="checkbox"/> Accident <input type="checkbox"/> Non-Traffic Meter # <input type="checkbox"/> Parking		<b>TRAFFIC/MISDEMEANOR CITATION/COMPLAINT</b> <input type="checkbox"/> School Zone <input type="checkbox"/> Hazmat <input type="checkbox"/> Construction Zone <input type="checkbox"/> S.T.E.P. <input type="checkbox"/> Urban <input type="checkbox"/> Rural		<b>CITATION NUMBER</b>		
Travel Direction: <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W		Beat/ Area:	Mile Marker:	<b>VIOLATION DATE</b>		
<b>At Location:</b>						
<b>Violation Date:</b>		<b>Time:</b>		<b>Issue Date:</b>		
<b>Day Code:</b> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7		Had Been Drinking: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown Test Type: <input type="checkbox"/> PBT <input type="checkbox"/> Blood <input type="checkbox"/> Breath <input type="checkbox"/> UA <input type="checkbox"/> Drugs Suspected Results: %				
Defendant Type: <input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other Explain:						
<b>THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF NEVADA</b>						
NAME (Last, First, Middle):				Social Security #:		
Address: <input type="checkbox"/> Physical <input type="checkbox"/> Mailing				City: State: Zip: Ctry:		
DOB:		Race:	Sex:	Height:	Weight:	
OLN / ID:		<input type="checkbox"/> CDL	State:	Class:	Expiration:	
Vehicle has current proof of insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No		Expiration Date of Insurance Card:				
<b>DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE AT THE ABOVE LISTED LOCATION:</b>						
<input type="checkbox"/> Commercial Vehicle <input type="checkbox"/> 16+ Pass Vehicle		US DOT #: VIN #:				
Vehicle License:		Lic. State:	Expiration:	Year:	Make:	
Reg. Owner:		Model: Type: Color:				
<input type="checkbox"/> Same		Address:				
<b>DID THEY AND THERE COMMIT THE FOLLOWING OFFENSE(S):</b>						
<b>1 Violation</b>		<b>CODE</b>				
Rooted Speed:		Actual Speed:	Cited Speed:	<input type="checkbox"/> NRS <input type="checkbox"/> CFR <input type="checkbox"/> County Code <input type="checkbox"/> Municipal Code		
To Wit:		NRS/County/City #				
<b>2 Violation</b>		<b>CODE</b>				
To Wit:		<input type="checkbox"/> NRS <input type="checkbox"/> CFR <input type="checkbox"/> County Code <input type="checkbox"/> Municipal Code				
NRS/County/City #						
<b>I certify (or declare) under penalty of perjury, that I have reasonable grounds/probable cause to believe and do believe that above named person committed the above offense(s) contrary to law.</b>						
Officer/Complainant's PRINTED Name:		Officer/Complainant's Signature:		P#:	Bureau:	
Las Vegas Municipal Court 100 E. Clark Ave Las Vegas, NV 89101 702-382-6878 1-800-654-6856	Las Vegas Justice Court 200 Lewis Ave. Las Vegas, NV 89155 702-671-3444 1-877-671-3183	Juvenile Justice Services 801 N. Peos Rd. Las Vegas, NV 89101 702-455-5380	Goodsprings Justice Court Box 19155 Jean, NV 89019 702-874-1405	North Las Vegas Municipal Court 2332 Las Vegas Blvd. N. Suite 100 N. Las Vegas, NV 89030 702-633-1130	Henderson Municipal Court 243 Water St. Henderson, NV 89015 702-267-3300	
Township/Justice Court:		<input type="checkbox"/> Court Mandatory		Phone:		
You are hereby ordered to appear on _____ day of _____ year at _____ a.m. OR <input type="checkbox"/> Regular Business Hours						
WITHOUT ADMITTING HAVING COMMITTED THE ABOVE OFFENSE(S), I HEREBY PROMISE TO RESPOND AS DIRECTED ON THIS NOTICE AND WAIVE MY RIGHT TO BE TAKEN IMMEDIATELY BEFORE A MAGISTRATE (NRS 484.799 AND NRS 484.803).						
Defendant's Signature <b>X</b>		Phone		<input type="checkbox"/> Interpreter Needed? LANGUAGE		
REV. 12-14 IV1000 Failure to comply with this complaint or future dates relating to this complaint will constitute a separate offense.						

WHICH COURT  
YOUR CITATION WILL BE  
FILED WITH.