WAIVER OF RIGHT TO SHOW CAUSE HEARING CAUSE NUMBER: ____ IN THE MUNICIPAL COURT STATE OF TEXAS VS **CITY OF SEAGOVILLE DALLAS COUNTY, TEXAS** LAST NAME, FIRST NAME WAIVER OF RIGHT TO SHOW CAUSE HEARING Defendant herein, having made a previous court appearance in which the defendant, knowingly and voluntarily pleaded to a Class C Misdemeanor. The Court deferred further proceedings without entering an adjudication of guilt pursuant to Article 45.051 (deferral of final disposition) or Article 45.0511 (driver's safety course) of the Texas Code of Criminal Procedure. On this, the ____ day of _ 20 , the Defendant requests that the deferral period be cancelled and knowingly and voluntarily waives his/her right to a Show-Cause Hearing. The defendant understands that a verdict of guilty will be entered and any outstanding balance is due.

*** NOTICE TO DEFENDANTS ***

Date

Defendant's Signature

YOUR PAYMENT CANNOT BE PROCESSED BY THE COURT

UNTIL YOU HAVE SIGNED THE ABOVE

WAIVER OF RIGHT TO SHOW CAUSE HEARING

THIS DOCUMENT SHOULD BE RETURNED

TO THE COURT WITHIN TEN (10) DAYS

TO THE FOLLOWING ADDRESS:

SEAGOVILLE MUNICIPAL COURT

702 N HIGHWAY 175

SEAGOVILLE, TEXAS 75159

972-287-2192