

Ticket (Citation) Number

The date the citation was issued.

State of Michigan
Uniform Law Citation

Ticket No. Victim Involved

US DOT # Incident No. Dept. No.

The People of: the State of Michigan
 Township City Village County

Local Use/Arrest No. Detection Device

SAC

SE: THE UNDER-SIGNED Month Day Year At approximately A.M. P.M. Date Month Day Year
SAYS THAT ON: Birth

State Oper./Chauff. CDL Driver License Number SSN (last 4 digits)

Race Sex Height Weight Hair Eyes Occupation/Employer

Name (First, Middle, Last)

Street

City State Zip Code

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Veh. Type

THE PERSON NAMED ABOVE, in violation of Local Ordinance State Law Administrative Rule

UPON

AT OR NEAR

WITHIN CITY VILLAGE TOWNSHIP OF

COUNTY OF DID THE FOLLOWING

Type	MCL Cite/PACC Code/ Ordinance	Description (include any bond amount collected on each charge)	Charge No.
<input type="checkbox"/> Crl <input type="checkbox"/> Warn <input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Walv	<input type="checkbox"/> Authorization pend.		1
<input type="checkbox"/> Crl <input type="checkbox"/> Warn <input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Walv	<input type="checkbox"/> Authorization pend.		2
<input type="checkbox"/> Crl <input type="checkbox"/> Warn <input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Walv	<input type="checkbox"/> Authorization pend.		3

TO THE COURT: Do not arraign on a felony charge until an authorized complaint is filed.

Offense Code(s)

1 2 3

Key for Type: Crl = Civil infraction Misd = Misdemeanor Fel = Felony Warn = Warning Fug = Fugitive
Walv = Violation for Which Fines/Costs May be Waived Authorization pend. = Authorization pending

Remarks:

CHECK IF APPROPRIATE Damage to Property Local Court Bond \$ _____
 Vehicle Impounded Injury License Posted In Lieu of Bond
 Traffic Crash Death Appearance Certificate
Person in Active Military Service Yes No None

SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS

Appearance Date on or before _____

Hearing Date (if applicable) on _____ Contact Court
 Juvenile Traffic Misd. (Court will Notify) Formal Hearing Required. (Court will Notify)

In the Court of

Court Address & Phone Number

I served a copy of the civil infraction complaint upon the defendant (or owner/occupant by posting if applicable).
I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's Signature and receipt if applicable Month Day Year

Officer's Name (printed) Officer's ID No.

Agency ORI Agency Name

MI-UC-01a (rev. 6/05)

The officer will check this box if the offense is a Civil Infraction-C/I.

Three separate offenses may be written on one citation.

APPEARANCE DATE

Court Address & Phone No.

The Agency Name field shows the Police agency that issued the ticket (citation).