

JUN 27 1995 *fyw/ces*

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RESOLUTION NO. 95-M-50

A RESOLUTION PERTAINING TO ORANGE COUNTY'S
CODE ENFORCEMENT CITATIONS.

WHEREAS, the Board of County Commissioners adopted Resolution No. 94-M-37 which approved the form of the code enforcement citations to be issued by Orange County;

WHEREAS, on March 28, 1995, Judge R. James Stroker, Chief Judge for the Ninth Judicial Circuit, entered an Administrative Order establishing a uniform code enforcement citation form to be used by the County and all municipalities within the County;

WHEREAS, Orange County desires to approve the uniform code enforcement citation so that the County will be in compliance with Judge Stroker's administrative order.

BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ORANGE COUNTY:

1. The Board of County Commissioners hereby approves the Code Enforcement Citation in substantially the same form as the citation attached hereto as Exhibit "A" and incorporated herein.

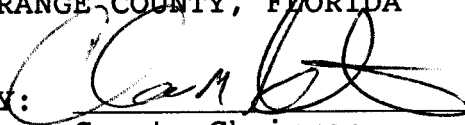
2. The Board of County Commissioners authorizes the County Administrator to approve subsequent changes to the code enforcement citation form provided any such changes comply with Florida law, the County Code and the Ninth Judicial Circuit's Administrative Orders.

3. Resolution 94-M-37 is hereby superceded to the extent it conflicts with the terms and provisions herein.

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4. This Resolution shall take effect upon adoption.
ADOPTED THIS 27TH DAY OF JUNE, 1995.

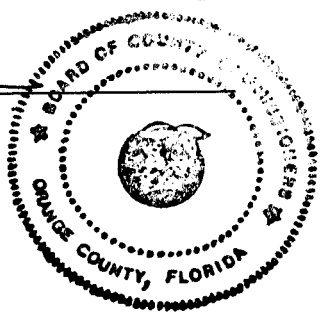
ORANGE COUNTY, FLORIDA

BY: 
County Chairman

DATE: JUN 27 1995

ATTEST: Martha O. Haynie, County Comptroller
As Clerk of the Board of County Commissioners

BY: 
Asst. Deputy Clerk



Orange County Uniform Code Citation		County Court Case No.	
Issuing Agency	<input type="checkbox"/> City Ordinance <input type="checkbox"/> County Code/Ordinance	Citation No.	Z 0217

The undersigned certifies that, upon personal investigation, he/she has reasonable cause to believe, and does believe, that on:

Day of the Week	Month	Day	Year	Time	<input type="checkbox"/> AM	<input type="checkbox"/> PM
First Name		M.I.		Last		
Street Address						
City		State		Zip Code		
Phone No.	D.O.B.	Race	Sex	Height		
Violator Identification: Driver's License, Social Security or Other						
State		Type of Identification				
Vehicle Make/Type (if applicable)		Year	Color	Tag No.		
Location of Violation:						

Did commit the following code violation/civil infraction:

Code/Section No.:		Description of Violation:	
Offense (if applicable): <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> Other (specify) _____		Class of Violation:	
Requires Mandatory Court Appearance (if applicable): <input type="checkbox"/> Yes <input type="checkbox"/> No		Penalty, if contested, not to exceed \$500.00. Penalty, if paid by _____ as follows: Total Amount Due if not Contested: \$ _____	
Signature of Officer		I.D. No.	
		Date & Time of Issuance	
		Time <input type="checkbox"/> AM <input type="checkbox"/> PM	
Print Name		Month	Day
Title of Officer		Year	

Notice to Violator:

This citation is issued pursuant to Section 162.21, Florida Statutes. The violation for which you are charged is a civil infraction. Your signature below does not constitute an admission of guilt; however, willful refusal to sign and accept this citation is a misdemeanor of the 2nd degree punishable by a fine of \$500.00 and/or 60 days in jail as provided by s.775.082 or s.775.083 Florida Statutes.

Failure to pay the applicable civil penalty or request a hearing shall constitute a waiver of your right to contest this citation, and judgment may be entered against you for an amount not to exceed \$500.00 per infraction.

If you elect not to contest the citation and admit to the violation, you may present this citation by mail or by person from 9 a.m. to 5 p.m. to the Clerk of the Orange County Court, 65 East Central Blvd., Room 171, Orlando, FL 32801, phone number (407) 836-2066 and pay the fine (reduced civil penalty). Payment must be made by cash, money order, or certified check made payable to the County Court of Orange County (no personal checks accepted, do not mail cash) by month _____ day _____ year _____.

If you elect to contest the citation you must appear in Court at _____ a.m./p.m., month _____ day _____ year _____ at the Orange County Court House, 65 East Central Blvd., Room 171, Orlando, FL, and request a hearing date.

Signature of Individual

See Other Side

W - County Court Y - County Court P - Inspector G - Defendant