

## **APPENDIX B**

*(Added February 2, 2009, effective nunc pro tunc January 1, 2009.)*

State of Hawai'i – Notice of Parking Infraction(s)  
In the District Court of the \_\_\_\_\_ Circuit

PARKING INFRACTION(S) COMMITTED & MONETARY  
ASSESSMENT(S) PAYABLE (INCLUDING FEES)

CITATION NO: xDTP-xx-xxxxxx

**COMPLAINT:** The undersigned officer, on behalf of Plaintiff State of Hawai'i, states that he/she has reasonable grounds to believe and does believe that on the date, at the time, and under the conditions indicated, the vehicle identified below was unlawfully parked in violation of the section(s) of the Hawai'i Revised Statutes (HRS), the \_\_\_\_\_, and/or the Hawai'i Administrative Rules (HAR) noted.

### VEHICLE INFORMATION

LICENSE PLATE/VIN		STATE		
MAKE	MODEL	TYPE	COLOR	YEAR

NAME OF OPERATOR

NAME OF REGISTERED OWNER(S)

OPERATOR LICENSE NO. STATE

ADDRESS OF OPERATOR (Street Number and Name)

CITY STATE ZIP CODE

ADDRESS OF REGISTERED OWNER(S) (Street Number and Name)

CITY STATE ZIP CODE


COMPANION CITATION(S)/NOTICE(S) (list citation no.)

### DETAILS REGARDING THE INFRACTION(S) CHARGED

DATE (Month/Day/Year) TIME DISTRICT BEAT

LOCATION OF INFRACTION(S) METER NO.

**ISSUING OFFICER:** If citing an Abandoned or Derelict Vehicle, note the circumstances below. Otherwise, completion of DIAGRAM and COMMENTS sections are optional.

**DIAGRAM** - Vehicle should be represented by a 

### COMPLAINING OFFICER INFORMATION

PRINT RANK, FIRST INITIAL, & LAST NAME ID NO.

OFFICER'S SIGNATURE DATE OF ISSUANCE

**NOTE TO DEFENDANT:** Please read the instructions below carefully, then complete and return your Answer to this Notice (tear-away flap on the preprinted envelope), along with any payment or written statement in support of your Answer, within 21 calendar days from the date of this Notice, either by mail, in person, via the Internet, or by telephone. If you choose to mail an Answer, payment, or written statement, please use the preprinted envelope, seal the contents, affix postage, and be sure your mailing is postmarked within 21 calendar days from the date of this Notice. The Post Office will not deliver without proper postage. Please calculate the total amount due by adding the monetary assessments for each infraction.

OFFICER'S COMMENTS

**State of Hawai'i – Notice of Parking Infraction(s)  
In the District Court of the \_\_\_\_\_ Circuit**

**IMPORTANT INSTRUCTIONS REGARDING YOUR NOTICE OF  
PARKING INFRACTION(S)**

This Notice of Parking Infraction(s) (Notice) charges you with committing one or more civil traffic (parking) infractions. **YOU MUST ANSWER THIS NOTICE WITHIN 21 CALENDAR DAYS FROM THE DATE OF THIS NOTICE by choosing Option 1, 2, or 3, below.** If you do not answer within 21 calendar days from the date of this Notice, the court will enter a default judgment against you for the total amount of monetary assessments and fees indicated on this Notice. If you fail to timely pay the default judgment, late fees and other costs will be assessed, your account may be referred to a collection agency, you may be charged for collection costs, and any state tax refund owed to you may be used to pay your obligations. The court may also order a registration stopper, preventing you from acquiring/renewing your motor vehicle registration, or from transferring title to the motor vehicle, until all obligations are paid in full. **YOU MUST TAKE ACTION WITHIN 21 CALENDAR DAYS FROM THE DATE OF THIS NOTICE TO AVOID ENTRY OF DEFAULT JUDGMENT AGAINST YOU.**

**OPTION 1: ADMIT & PAY**

If you admit committing the parking infraction(s), complete, sign, and date the Answer to Notice (tear-away flap on the preprinted envelope) and return it with the total amount due and your copy of this Notice. You may pay by mail, using the preprinted envelope; in person at any district court; via the Internet; or by telephone. A \$25 service fee will be charged for dishonored payments.

- **By Mail** – Your Answer to Notice, payment, and copy of this Notice must be postmarked within 21 calendar days from the date of this Notice. **DO NOT SEND CASH.** Imprinted checks or money orders (U.S. dollars only, payable to "DISTRICT COURT") and credit or debit cards (MasterCard & VISA) are accepted.
- **In Person** – Pay at any district court statewide within 21 calendar days from the date of this Notice. Counter service hours for Honolulu District Court, Traffic Violations Bureau are 8:00 a.m. to 4:00 p.m. on Mondays, Tuesdays, Thursdays, and Fridays, and 8:00 a.m. to 9:00 p.m. on Wednesdays. Counter service hours for all other district courts (except Hana, Puna, Ka'u, Hamakua, and North Kohala) are 8:00 a.m. to 4:00 p.m. Monday through Friday. All district courts are closed on state holidays. Cash, imprinted checks and money orders (U.S. dollars only, payable to "DISTRICT COURT"), and credit or debit cards (MasterCard & VISA) are accepted.
- **Via Internet** – Pay via the Internet at <http://www.courts.state.hi.us> (Click on "Pay Fines") within 21 calendar days from the date of this Notice. Credit or debit cards (MasterCard & VISA) are accepted.
- **By Telephone** – Call 1-800-679-5949 within 21 calendar days from the date of this Notice. Credit or debit cards (MasterCard & VISA) are accepted.

**OPTION 2: DENY**

If you deny committing the parking infraction(s), you may either (1) request a hearing and appear in person to contest the infraction(s), or (2) submit a written statement explaining the grounds on which you contest the infraction(s). In either event, you must complete, sign, and date the Answer to Notice (tear-away flap on the preprinted envelope) and return your Answer to Notice, your copy of this Notice, and any written statement, within 21 calendar days from the date of this Notice, either by mail, using the preprinted envelope, or in person at any district court.

- **Contest in Person** – If you request a hearing to contest the infraction(s) in person, the court will notify you (or the registered owner of the vehicle) in writing of the date, time, and location of the hearing. You must appear at the hearing to explain the grounds on which you contest the infraction(s). If you want the issuing officer or any other witness present at the hearing, you must request a subpoena from the district court at least 10 days before the hearing date, have the subpoena served, and pay mileage/witness fees required to effectuate service. If you fail to appear at the hearing, the court may enter a default judgment against you for the total amount of monetary assessments and fees indicated on this Notice. **DO NOT SUBMIT PAYMENT WITH YOUR HEARING REQUEST.** You will be notified of the judge's decision after the hearing. If you disagree with the judge's decision, you may request a trial.
- **Contest By Written Statement** – If you submit a written statement explaining the grounds on which you contest the infraction(s), include your name,

address, operator license number, citation number, and signature on the statement. When you submit a written statement with your Answer to Notice, no hearing will be scheduled. **DO NOT SUBMIT PAYMENT WITH YOUR WRITTEN STATEMENT.** You will be notified by mail of the judge's decision. If you disagree with the judge's decision, you may request a trial.

**OPTION 3: ADMIT BUT EXPLAIN MITIGATING CIRCUMSTANCES**

If you admit committing the parking infraction(s) but wish to explain mitigating circumstances, you may either (1) request a hearing and appear in person to explain mitigating circumstances, or (2) submit a written statement explaining the mitigating circumstances. In either event, you must complete, sign, and date the Answer to Notice (tear-away flap on the preprinted envelope) and return your Answer to Notice, your copy of this Notice, and any written statement, within 21 calendar days from the date of this Notice, either by mail, using the preprinted envelope, or in person at any district court.

- **Explain Mitigating Circumstances In Person** – If you request a hearing to explain mitigating circumstances in person, the court will notify you (or the registered owner of the vehicle) in writing of the date, time, and location of the hearing. If you fail to appear at the hearing, you must pay the total amount of monetary assessments and fees indicated on this Notice. **DO NOT SUBMIT PAYMENT WITH YOUR HEARING REQUEST.** You will be notified of the judge's decision after the hearing. **The judge's decision is FINAL and cannot be appealed.**
- **Explain Mitigating Circumstances By Written Statement** – If you submit a written statement explaining the grounds on which you contest the infraction(s), include your name, address, operator license number, citation number, and signature on the statement. When you submit a written statement with your Answer to Notice, no hearing will be scheduled. **DO NOT SUBMIT PAYMENT WITH YOUR WRITTEN STATEMENT.** You will be notified by mail of the judge's decision. **The judge's decision is FINAL and cannot be appealed.**

**IMPORTANT NOTE FOR JUVENILES UNDER AGE 18**

Your parent or legal guardian must accompany you when appearing before the court and must co-sign any payment or written statement submitted to the court.

**ADDRESSES FOR THE DISTRICT COURT OF THE \_\_\_\_\_ CIRCUIT**



If you require an accommodation for a disability when working with a court program, service, or activity, please contact the Disability Accommodations Coordinator at (808) 538-5121, FAX: (808) 538-5233, TTY: (808) 539-4853, at least ten (10) working days before your proceeding, hearing, or appointment date.

**State of Hawai'i – Notice of Traffic Infraction(s)  
In the District Court of the \_\_\_\_\_ Circuit****CITATION NO: xDTI-xx-xxxxxx**

**COMPLAINT:** The undersigned officer, on behalf of Plaintiff State of Hawai'i, states that he/she has reasonable grounds to believe and does believe that on the date, at the time, and under the conditions indicated, the named defendant did commit the civil traffic infraction(s) noted below.

**OPERATOR INFORMATION**

LAST NAME	REGISTERED OWNER			
FIRST NAME	MIDDLE INITIAL(S)			
HOME ADDRESS (Street Number and Name)				
CITY	STATE	ZIP CODE		
JUVENILE	PROVISIONAL LICENSE	PARENT'S NAME (if juvenile operator)		
OPERATOR LICENSE NO.	STATE	EXP. DATE (month/day/year)		
DATE OF BIRTH (month/day/year)	HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR
CLASS	CDL	RESTRICTIONS	U.S. CITIZEN	SEX
CONTACT PHONE NUMBER(S)	SSN-last 4 Digits (optional, for identification purposes)	MILITARY SERVICE		
EMPLOYER/SCHOOL/BRANCH OF SERVICE				

**REGISTERED OWNER INFORMATION (if different from operator information)**  
LAST NAME

FIRST NAME MIDDLE INITIAL(S)

HOME ADDRESS (Street Number and Name)

CITY STATE ZIP CODE

**VEHICLE INFORMATION**

LICENSE PLATE/VIN STATE HAZ MAT

MAKE MODEL TYPE COLOR YEAR CMV

**TRAFFIC INFRACTION(S) COMMITTED &  
MONETARY ASSESSMENT(S) PAYABLE (INCLUDING FEES)****DETAILS REGARDING THE INFRACTION(S) CHARGED**

DATE (Month/Day/Year) TIME DISTRICT BEAT

WEATHER:

ROAD:

TRAFFIC:

LIGHTING:

NO. OF OCCUPANTS: ADULT MALE(S) ADULT FEMALE(S) CHILDREN

LOCATION OF VIOLATION

VANTAGE POINT

LANE OF TRAVEL

SIGN(S) POSTED

ACTUAL SPEED POSTED SPEED SPEED VIOLATION MEASURED BY

☐ I WAS CERTIFIED IN THE ABOVE DEVICE ☐ LASER DISTANCE☐ DEVICE/SPEEDOMETER WAS ACCURATE, TESTED, & WORKING PROPERLY

COMPANION CITATION(S)/NOTICE(S) (list citation/notice no.) ACCIDENT INJURY

ACCIDENT REPORT NO. PROPERTY DAMAGE

OFFICER'S OBSERVATIONS (optional)

**COMPLAINING OFFICER INFORMATION**

PRINT RANK, FIRST INITIAL, &amp; LAST NAME ID. NO.

OFFICER'S SIGNATURE DATE OF ISSUANCE

**DEFENDANT'S ACKNOWLEDGEMENT:** By signing below, I acknowledge service of this Notice. I understand that my signature is not an admission of responsibility.

Defendant's Signature ☐ DEFENDANT REFUSES TO SIGN

# RULES OF THE DISTRICT COURTS

## Appendix B

**NOTE TO DEFENDANT:** Please read the instructions below carefully, then complete and return your Answer to this Notice (tear-away flap on the preprinted envelope), along with any payment or written statement in support of your Answer, within 21 calendar days from the date of this Notice, either by mail, in person, via the Internet, or by telephone. If you choose to mail an Answer, payment, or written statement, please use the preprinted envelope, seal the contents, affix postage, and be sure your mailing is postmarked within 21 calendar days from the date of this Notice. The Post Office will not deliver without proper postage. Please calculate the total amount due by adding the monetary assessments for each infraction.

If you are a **"PROVISIONAL LICENSE HOLDER"** or if the word **"COURT"** is listed next to an infraction that you are charged with committing, you are hereby directed to appear before the District Court of the \_\_\_\_\_ Circuit on the date and at the time and location designated below (*see below for address*) to answer the charge(s). Failure to obey this Notice and Summons may result in a fine, imprisonment, arrest on other charges, and/or other penalties.

### SUMMONS

**COURT LOCATION** (see addresses below)

DATE	TIME	COURTROOM
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**State of Hawai'i – Notice of Traffic Infraction(s)  
In the District Court of the \_\_\_\_\_ Circuit**

#### IMPORTANT INSTRUCTIONS REGARDING YOUR NOTICE OF TRAFFIC INFRACTION(S)

This Notice of Traffic Infraction(s) (Notice) charges you with committing one or more civil traffic infractions. **IF YOU ARE A "PROVISIONAL LICENSE HOLDER" OR IF THE WORD "COURT" IS LISTED NEXT TO AN INFRACTION THAT YOU ARE CHARGED WITH COMMITTING, YOU MUST APPEAR BEFORE THE DISTRICT COURT OF THE \_\_\_\_\_ CIRCUIT ON THE DATE AND AT THE TIME AND LOCATION DESIGNATED IN THE SUMMONS ABOVE.** Failure to appear in court as summoned may result in your arrest for other offenses and/or imposition of other penalties, including fines, court costs, fees, and imprisonment.

**If you are charged with committing an infraction with a listed monetary assessment, you must answer this Notice within 21 calendar days from the date of this Notice by choosing Option 1, 2, or 3, below.** If you do not answer within 21 calendar days from the date of this Notice, the court will enter a default judgment against you for the total amount of monetary assessments and fees indicated on this Notice. If you fail to timely pay the default judgment, late fees and other costs will be assessed, your account may be referred to a collection agency, you may be charged for collection costs, and any state tax refund owed to you may be used to pay your obligations. The court may also order a license stopper, preventing you from acquiring/renewing your driver's license until all obligations are paid in full. **YOU MUST TAKE ACTION WITHIN 21 CALENDAR DAYS FROM THE DATE OF THIS NOTICE TO AVOID ENTRY OF DEFAULT JUDGMENT AGAINST YOU.**

#### OPTION 1: ADMIT & PAY

If you admit committing the traffic infraction(s), complete, sign, and date the Answer to Notice (tear-away flap on the preprinted envelope) and return it with the total amount due and your copy of this Notice. You may pay by mail, using the preprinted envelope; in person at any district court; via the Internet; or by telephone. A \$25 service fee will be charged for dishonored payments.

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courts are closed on state holidays. Cash, imprinted checks and money orders (U.S. dollars only, payable to "DISTRICT COURT"), and credit or debit cards (MasterCard & VISA) are accepted.

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#### OPTION 2: DENY

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#### OPTION 3: ADMIT BUT EXPLAIN MITIGATING CIRCUMSTANCES

If you admit committing the traffic infraction(s) but wish to explain mitigating circumstances, you may either (1) request a hearing and appear in person to explain mitigating circumstances, or (2) submit a written statement explaining the mitigating circumstances. In either event, you must complete, sign, and date the Answer to Notice (tear-away flap on the preprinted envelope) and return your Answer to Notice, your copy of this Notice, and any written statement, within 21 calendar days from the date of this Notice, either by mail, using the preprinted envelope, or in person at any district court.

- **Explain Mitigating Circumstances In Person** – If you request a hearing to explain mitigating circumstances in person, the court will notify you in writing of the date, time, and location of the hearing. If you fail to appear at the hearing, you must pay the total amount of monetary assessments and fees indicated on this Notice. **DO NOT SUBMIT PAYMENT WITH YOUR HEARING REQUEST.** You will be notified of the judge's decision after the hearing. **The judge's decision is FINAL and cannot be appealed.**
- **Explain Mitigating Circumstances By Written Statement** – If you submit a written statement explaining the grounds on which you contest the infraction(s), include your name, address, operator license number, citation number, and signature on the statement. When you submit a written statement with your Answer to Notice, no hearing will be scheduled. **DO NOT SUBMIT PAYMENT WITH YOUR WRITTEN STATEMENT.** You will be notified by mail of the judge's decision. **The judge's decision is FINAL and cannot be appealed.**

#### IMPORTANT NOTE FOR JUVENILES UNDER AGE 18

Your parent or legal guardian must accompany you when appearing before the court and must co-sign any payment or written statement submitted to the court.

**INFORMATION ABOUT YOUR PRIVACY**

Disclosure of the last four digits of your social security number (SSN) on this Notice is optional. The last four digits of your SSN will be used for identification purposes in administering state and federal driver's license and motor vehicle laws.

**ADDRESSES FOR THE DISTRICT COURT OF THE      CIRCUIT**

If you require an accommodation for a disability when working with a court program, service, or activity, please contact the Disability Accommodations Coordinator at (808) 538-5121, FAX: (808) 538-5233, TTY: (808) 539-4853, at least ten (10) working days before your proceeding, hearing, or appointment date.

**RULES OF THE DISTRICT COURTS****Appendix B****State of Hawai'i – Citation for Traffic Crime(s) Arrest  
In the District Court of the \_\_\_\_\_ Circuit****LAW(S) VIOLATED AND TRAFFIC CRIME(S) COMMITTED****CITATION NO: xDTC-xx-xxxxxx****DETAILS REGARDING THE OFFENSE(S) CHARGED**

**COMPLAINT:** The undersigned officer, on behalf of Plaintiff State of Hawai'i, declares under penalty of law that he/she has probable cause to believe and does believe that on the date, at the time, and under the conditions indicated, the named defendant did commit the criminal offense(s) noted below and that the same is true and correct to the best of his/her knowledge and belief.

**DATE** (Month/Day/Year) **TIME** **DISTRICT** **BEAT****WEATHER:****ROAD:****TRAFFIC:****LIGHTING:****NO. OF OCCUPANTS:** **ADULT MALE(S)** **ADULT FEMALE(S)** **CHILDREN****LOCATION OF VIOLATION****VANTAGE POINT****LANE OF TRAVEL****SIGN(S) POSTED****ACTUAL SPEED** **POSTED SPEED** **SPEED VIOLATION MEASURED BY**☐ **I WAS CERTIFIED IN THE ABOVE** ☐ **LASER DISTANCE**  
**DEVICE**☐ **DEVICE/SPEEDOMETER WAS ACCURATE, TESTED, & WORKING PROPERLY****COMPANION CITATION(S) / NOTICE(S)** **ACCIDENT**  
**INJURY**  
(list citation/notice no.)**ACCIDENT REPORT NO.****PROPERTY DAMAGE****OFFICER'S STATEMENT OF FACTS****DEFENDANT****LAST NAME** **REGISTERED OWNER****FIRST NAME** **MIDDLE INITIAL(S)****HOME ADDRESS (Street Number and Name)****CITY** **STATE** **ZIP CODE****JUVENILE** **PROVISIONAL LICENSE** **PARENT'S NAME** (if juvenile operator)**OPERATOR LICENSE NO.** **STATE** **EXP. DATE** (month/day/year)**DATE OF BIRTH** (month/day/year) **HEIGHT** **WEIGHT** **HAIR COLOR** **EYE COLOR****CLASS** **CDL** **RESTRICTIONS** **U.S. CITIZEN** **SEX****CONTACT PHONE NUMBER(S)** **SSN-last 4 Digits** **MILITARY SERVICE**  
(required by HRS § 803-6(c)(2))**EMPLOYER/SCHOOL/BRANCH OF SERVICE****REGISTERED OWNER INFORMATION** (if different from operator information)**LAST NAME****FIRST NAME** **MIDDLE INITIAL(S)****HOME ADDRESS (Street Number and Name)****CITY** **STATE** **ZIP CODE****VEHICLE INFORMATION****LICENSE PLATE/VIN** **STATE** **HAZ MAT****MAKE** **MODEL** **TYPE** **COLOR** **YEAR** **CMV**

## COMPLAINING OFFICER INFORMATION

PRINT RANK, FIRST INITIAL, &amp; LAST NAME

ID NO.

OFFICER'S SIGNATURE

DATE OF ISSUANCE

**DEFENDANT'S ACKNOWLEDGEMENT:** By signing below, I agree to appear before the District Court of the \_\_\_\_\_ Circuit on the date and at the time and location designated below to answer the charge(s). **I understand that my signature is not an admission to the charge(s).**

**Defendant's Signature**

(Please read instructions below)

☐ DEFENDANT REFUSES TO SIGN

The Defendant is hereby directed to appear before the District Court of the \_\_\_\_\_ Circuit on the date and at the time and location designated below (see *below for address*) to answer the charge(s). Failure to obey this Citation and Summons may result in a fine, imprisonment, arrest on other charges, and/or other penalties.

## SUMMONS

COURT LOCATION (see addresses below)

DATE

TIME

COURTROOM

### State of Hawai'i – Notice of Traffic Crimes(s) Arrest In the District Court of the \_\_\_\_\_ Circuit

**IMPORTANT INSTRUCTIONS - READ CAREFULLY**

This Citation for Traffic Crime(s) Arrest (Citation) charges you with committing one or more traffic crimes, in violation of a section of the Hawai'i Revised Statutes (HRS), the Hawai'i Administrative Rules (HAR), or the \_\_\_\_\_. **This Citation summons you to appear before the District Court of the \_\_\_\_\_ Circuit to answer the charge(s) on the date and at the time and location designated in the Summons on this Citation.** Failure to appear in court as summoned may result in the forfeiture of any bail you may have posted, your arrest for other offenses, and/or imposition of additional penalties, including fines, court costs, fees, and imprisonment.

**INFORMATION ABOUT YOUR COURT APPEARANCE**

Please arrive early on the date of your court hearing. If you are not present in the courtroom when your case is called, a bench warrant for your arrest (for contempt of court, failure to appear, or other charges) may be issued, and your bail/bond may be forfeited. Bring this Citation to court with you, and check in with the bailiff or court clerk when you arrive at the proper courtroom.

**Your Rights to Trial and Counsel:** Depending on the charge(s) against you, you may be entitled to a trial by jury. Additionally, if you cannot afford an attorney and are charged with an offense punishable by imprisonment, you may be entitled to have an attorney appointed by the court to represent you at no cost to yourself. If you wish to apply for legal services through the Office of the Public Defender, you will be required to complete a written application. You will be informed of these rights at your court appearance.

**Driver's License Offenses:** If you are charged with operating a motor vehicle without a valid driver's license (e.g. expired, suspended, or revoked license), your case may be dismissed by the State (prosecuting attorney) if you produce in court a driver's license or other proof that you were validly licensed on the date of the offense (such as a certification from the Driver's Licensing Division of your state/county). Proof of valid license will NOT be accepted at the district court counter; you must appear in court on the date and at the time designated on this Citation.

**Insurance Offenses:** If you are charged with not having a valid motor vehicle insurance policy (HRS § 431:10C-104) or valid motorcycle/motor scooter insurance policy (HRS § 431:10G-102), your case may be dismissed by the State (prosecuting attorney) if you produce in court proof of insurance coverage, in the form of an affidavit from an insurance company licensed in the State of Hawai'i, that the motor vehicle or motorcycle/motor scooter was insured on the date of the offense. Proof of valid insurance will NOT be accepted at the district court counter; you must appear in court on the date and at the time designated on this Citation.

**If You Cannot Appear in Court on the Date and at the Time Designated in the Summons:** If you have a valid reason for not being able to appear in court on the date and at the time designated in the Summons, you must file with the designated district court a written motion to request a continuance of your hearing, either (1) by mail to the designated court at the address listed below, or (2) in person at the designated court at the address listed below. You must explain your reason(s) for requesting a continuance. **The designated district court must receive your motion for continuance no later than 48 hours prior to your scheduled court date and time.** If your motion is granted, you will be informed of the new court date and time. If your motion is denied, you must appear in court as summoned by this Citation. Continuance request forms are available at any district court or via the Internet at <http://www.courts.state.hi.us>.

**IMPORTANT NOTE FOR JUVENILE DEFENDANTS**

Juvenile defendants under eighteen (18) years of age must be accompanied by a parent or legal guardian when appearing before the court.

**INFORMATION ABOUT YOUR PRIVACY**

Disclosure of the last four digits of your Social Security Number (SSN) on this Citation is mandatory pursuant to HRS § 803-6(c)(2). The last four digits of your SSN will be used for identification purposes in administering state and federal driver's license and motor vehicle laws, including laws governing the revocation of a driver's license and proof of financial responsibility.

**ADDRESSES FOR THE DISTRICT COURT OF THE \_\_\_\_\_ CIRCUIT**

If you require an accommodation for a disability when working with a court program, service, or activity, please contact the Disability Accommodations Coordinator at (808) 538-5121, FAX: (808) 538-5233, TTY: (808) 539-4853, at least ten (10) working days before your proceeding, hearing, or appointment date.