

ANDALE MUNICIPAL COURT

326 Main Street ♦ Andale, Kansas 67001
Phone: (316) 444-2351 ♦ Fax: (316) 444-2322
treasurer@cityofandale.com

The City Prosecutor has established a Minor Traffic Amendment policy for some traffic violations. If you are eligible, your charge will be amended to a non-moving violation that does not get reported to the State of Kansas. Submitting the application and fee does not guarantee the amendment request will be approved.

ELIGIBILITY

The following moving violations are eligible for the Minor Traffic Amendment Application:

- § 12 – Traffic Control Device
- § 13 – Traffic Light
- § 32 – Basic Speed Rule
- § 33 – Speeding (20 mph or less over the posted limit)
- § 48 – Divided Highways
- § 49 – Illegal Turn
- § 50 – Illegal Turn at Intersections
- § 51 – U-Turns
- § 54 – Failure to Signal
- § 59 – Stop Signs or Yield Signs

The City Prosecutor will make the final determination for amendment based on all relevant information.

You are NOT eligible if:

- **You carry a CDL endorsement on your driver's license.**
- **Your speed exceeded 20 MPH over the speed limit, or exceeded 10 MPH over the speed limit in a construction zone or active school zone.**
- **Your violation involved an accident.**
- **Your citation includes any other pending charges (cannot amend more than a single charge)**
- **In the 12 months prior to your current citation, you entered into a diversion agreement or received an amendment for any traffic violation.**
- **In the 24 months prior to your current citation, you were convicted of any traffic violations.**

PROCEDURE

Within 10 days of receiving your citation, submit the completed application for Minor Traffic Amendment with a nonrefundable \$25 application fee. Payment may be made in the form of cash, personal check, money order or cashier's check payable to Andale Municipal Court. Your application payment will be applied toward your overall costs, regardless of acceptance.

Once the application and payment have been received it will be reviewed by the City Prosecutor. You will receive notification by mail whether your amendment application has been accepted or not. If applying for an amendment, you are responsible for continuing your case until the final determination is made. Continuances can be made by contacting the Andale Municipal Court at (316) 444-2351. If the application is accepted you will have 30 days to pay the remaining balance. The amendment will not be made until full and timely payment is received.

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Minor Traffic Amendment Application

(Please Print Legibly)

Last Name	First Name	Initial
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Street Address

City	State	Zip Code
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Cell / Home Phone	Work Phone
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Date of Birth	Social Security Number
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Driver's License Number	State of Issuance
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Defense Attorney (If any)	Phone Number
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Citation Number	Date Received
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List the number of traffic citations you have received in the past 2 years regardless of outcome: _____

Did you have a CDL endorsement on your driver's license at the time of the offense? YES ___ NO ___

I hereby apply for an amendment on my minor traffic citation. I agree that failure to respond to the information requested or giving false or misleading information in the application will lead to a denial of any amendment. I admit that I committed the traffic offense alleged in the Uniform Notice to Appear and Complaint issued to me.

I declare (or verify, certify or state) under penalty of perjury that the information in this application is true and correct.

Signature of Defendant	Date Completed
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The amounts due for amendment will be: 1) the original fine, 2) court costs, and 3) the amendment fee based on the schedule below.

6-10 MPH over the posted speed limit-----	\$ 50.00	(\$75.00 if school/const zone)
11-15 MPH over the posted speed limit -----	\$ 75.00	
16-20 MPH over the posted speed limit -----	\$100.00	
Other Moving Violations-----	\$ 75.00	

If full payment is not received within 30 days of your application being accepted, then the amendment will not be made and you will be responsible for appearing in court on the original charge.

For Office Use Only

Balance Due _____ Amount Received _____ Paid in Full _____

Approved _____ Denied _____ Date _____

City Prosecutor