

PALISADE MUNICIPAL COURT Mesa County, Colorado Court Address: 341 W 7 TH STREET PALISADE, CO 81526-0128	▲ COURT USE ONLY ▲
Petition of: Defendant (Primary subject of the criminal justice record)	Case Number: Division: Courtroom:
MOTION TO SEAL CRIMINAL JUSTICE RECORDS PURSUANT TO §24-72-702.5, C.R.S.	

I, _____ (defendant's name), am the defendant in the above captioned case.

Defendant's Name: _____ Date of Birth: _____

Current Mailing Address: _____

City: _____ State: _____ Zip Code: _____

- I was acquitted of all charges on _____.
- The case was completely dismissed on _____, and the dismissal was not part of a plea agreement in a separate case.
- I completed a diversion agreement on _____.
- I completed a deferred judgment and sentence on _____, and the deferred judgment and sentence does not pertain to any of the following offenses:
 - Driving Under the Influence (D.U.I.), Driving While Ability Impaired (DWAI), or D.U.I. Per-Se pursuant to § 42-4-1301(1) or (2), C.R.S.,
 - An offense concerning the holder of a commercial driver's license or the operator of a commercial motor vehicle pursuant to § 42-2-402, C.R.S.
 - An offense for which the factual basis involved unlawful sexual behavior pursuant to § 16-22-102(9), C.R.S.

I have paid any and all restitution, fines, court costs, late fees or other fees ordered by the Court, or the Court has vacated such order(s).

The records in this case do not pertain to a class 1 misdemeanor traffic offense, class 2 misdemeanor traffic offense, class A traffic infraction, or a class B traffic infraction.

Agencies having records related to this case are:

- Palisade Police Department Department
- Municipal Prosecuting Attorney Attorney
- Colorado Bureau of Investigation (Statute authorizes this agency to asses an additional fee to seal its records)

Law Enforcement Agency (identify): _____

Other: _____

Arrest number (from fingerprint card): _____ Date: _____

I respectfully request that any criminal justice records, except identifying information, related to this case be sealed promptly pursuant to § 24-72-702.5, C.R.S.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

VERIFICATION

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the _____ day of _____, _____, at _____
(date) (month) (year) (city or other location, and state OR country)

(Printed name of Defendant)

Signature of Defendant

CERTIFICATE OF MAILING

I certify that on _____ (date) a true and accurate copy of this *Motion to Seal Criminal Justice Records Pursuant to §24-72-702.5, C.R.S.* was served on the Prosecuting Attorney by:

Hand Delivery E-filed Faxed to this number (970) 928-0944 or by placing it in the United States mail, postage prepaid, and addressed to the following:

Timothy L Graves
LeMoine & Graves, P.C.
PO Box 907
Rifle, CO 81650

Signature of Petitioner