

CHAPTER 2000
OFFICE OF THE ATTORNEY GENERAL
TRAFFIC TICKET FORM

UNIFORM TRAFFIC TICKETS
2000.5100 PURPOSE.
2000.5200 FORM.

2000.9990 UNIFORM TRAFFIC TICKET
FORM NO. 2.

2000.0200 [Repealed, 11 SR 618]

2000.0300 [Repealed, 11 SR 618]

2000.0400 [Repealed, 11 SR 618]

2000.0500 [Repealed, 11 SR 618]

2000.0600 [Repealed, 11 SR 618]

2000.0700 [Repealed, 11 SR 618]

2000.0800 [Repealed, 11 SR 618]

2000.0900 [Repealed, 11 SR 618]

2000.1000 [Repealed, 11 SR 618]

UNIFORM TRAFFIC TICKETS

2000.5100 PURPOSE.

The purpose of this rule is to establish the detailed form of the Uniform Traffic Ticket, as required by Extra Session Laws 1961, chapter 19.

Statutory Authority: *MS s 169.99 subd 2*

2000.5200 FORM.

The Uniform Traffic Ticket shall be 4-1/4 inches by 7-1/2 inches in size and shall be in the form in part 2000.9990, subparts 1 to 8, which form is identified as Uniform Traffic Ticket Form No. 2, and is made a part hereof by reference.

Statutory Authority: *MS s 169.99 subd 2*

2000.9900 [Repealed, 11 SR 618]

2000.9905 [Repealed, 11 SR 618]

2000.9910 [Repealed, 11 SR 618]

2000.9915 [Repealed, 11 SR 618]

2000.9920 [Repealed, 11 SR 618]

2000.9925 [Repealed, 11 SR 618]

2000.9930 [Repealed, 11 SR 618]

2000.9935 [Repealed, 11 SR 618]

2000.9940 [Repealed, 11 SR 618]

2000.9945 [Repealed, 11 SR 618]

2000.9950 [Repealed, 11 SR 618]

2000.9955 [Repealed, 11 SR 618]

2000.9960 [Repealed, 11 SR 618]

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2000.9965 [Repealed, 11 SR 618]

2000.9970 [Repealed, 11 SR 618]

2000.9975 [Repealed, 11 SR 618]

2000.9977 [Repealed, 11 SR 618]

2000.9980 [Repealed, 11 SR 618]

2000.9983 [Repealed, 11 SR 618]

2000.9985 [Repealed, 11 SR 618]

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STATE OF MINNESOTA COUNTY of _____		} ss COMPLAINT		COUNTY COURT DIVISION _____		HP 000 000	
The Undersigned, being duly sworn, deposes and says that on: _____, 19____, at _____ Time _____ _____ (Juvenile Parent/Guardian)							
Name _____ of _____ Street _____ City _____ State _____ Zip _____ did unlawfully at _____ Location _____ located in the county and state aforesaid (Operate) (Park) a motor vehicle, to wit: _____				LICENSE INFORMATION Drivers License Number _____ State _____ Date of Birth _____			
Make _____ Registration _____ State _____ and then and there did commit the following offense: <input type="checkbox"/> SPEEDING (Over Limit) _____ m.p.h. in _____ zone <input type="checkbox"/> IMPROPER (Turn) (Passing) (Lane Usage) <input type="checkbox"/> DISOBEYED (Stop Sign) (Semaphore) <input type="checkbox"/> _____ (Other Specify) _____		Trailer Registration _____ ROAD TYPE <input type="checkbox"/> Residential <input type="checkbox"/> Rural <input type="checkbox"/> Urban <input type="checkbox"/> Undivided <input type="checkbox"/> Multi-Lane <input type="checkbox"/> Divided <input type="checkbox"/> _____ WEATHER <input type="checkbox"/> Clear/Cloudy <input type="checkbox"/> Rain/Snow <input type="checkbox"/> _____ PAVEMENT <input type="checkbox"/> Normal <input type="checkbox"/> Slippery VISIBILITY <input type="checkbox"/> Normal <input type="checkbox"/> Impaired _____ ACCIDENT <input type="checkbox"/> Property Damage <input type="checkbox"/> Fatal Why _____ <input type="checkbox"/> Personal Injury <input type="checkbox"/> Pedestrian		Eyes _____ Height _____ Weight _____ Sex _____ CIRCUMSTANCES		Date of Court Appearance _____ 19____ Day _____ A.M. _____ P.M. _____ Month _____ Address: _____	
in violation of the (Statute) (Ordinance) Sec. No. _____ in such case made and provided and against the peace and dignity of the State of Minnesota. _____ Was offense committed in a manner or under circumstances so as to endanger or be likely to endanger any person or property? Yes or No _____							
Subscribed and sworn before me this _____ day of _____, 19____ _____ Name _____ Title _____				Complainant Signature _____ Name _____ Department _____ Badge _____			

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STATE OF MINNESOTA COUNTY of _____		ss ABSTRACT OF COURT RECORD		COUNTY COURT DIVISION _____		HP 000 000	
The Undersigned, being duly sworn, deposes and says that on: _____, 19____, at _____ Time _____ _____ (Juvenile Parent/Guardian)							
Name _____ of _____ Street _____ City _____ State _____ Zip _____ did unlawfully at _____ Location _____ located in the county and state aforesaid (Operate) (Park) a motor vehicle, to wit: _____				LICENSE INFORMATION:			
				Drivers License Number _____ State _____ Date of Birth _____			
Make _____ Registration _____ State _____ and then and there did commit the following offense:		Trailer Registration _____ Eyes _____ Height _____ Weight _____ Sex _____		CIRCUMSTANCES		promise to appear in said court at the stated time and place.	
<input type="checkbox"/> SPEEDING (Over Limit) _____ m.p.h. in _____ zone <input type="checkbox"/> IMPROPER (Turn) (Passing) (Lane Usage) <input type="checkbox"/> DISOBEYED (Stop Sign) (Semaphore) <input type="checkbox"/> _____ (Other Specify) _____		ROAD TYPE <input type="checkbox"/> Residential <input type="checkbox"/> Rural <input type="checkbox"/> Urban <input type="checkbox"/> Undivided <input type="checkbox"/> Multi-Lane <input type="checkbox"/> Divided <input type="checkbox"/> _____ WEATHER <input type="checkbox"/> Clear/Cloudy <input type="checkbox"/> Rain/Snow <input type="checkbox"/> _____ PAVEMENT <input type="checkbox"/> Normal <input type="checkbox"/> Slippery VISIBILITY <input type="checkbox"/> Normal <input type="checkbox"/> Impaired ACCIDENT <input type="checkbox"/> Property Damage <input type="checkbox"/> Fatal Why _____ <input type="checkbox"/> Personal Injury <input type="checkbox"/> Pedestrian					
in violation of the (Statute) (Ordinance) Sec. No. _____ in such case made and provided and against the peace and dignity of the State of Minnesota.							
_____ Was offense committed in a manner or under circumstances so as to endanger or be likely to endanger any person or property?							
Subscribed and sworn before me this _____ day of _____, 19____				Date of Court Appearance _____ A.M. _____ P.M. _____ 19____ Day _____ Month _____ Address: _____			
Name _____ Title _____							
Complainant Signature _____ Name _____ Department _____ Badge _____							

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CERTIFICATE OF CONVICTION or REPORT OF HEARING

The undersigned hereby certifies that on _____, 19____, in this court, defendant was convicted of _____, an offense relating to the operation of motor vehicles.

Further, that said conviction resulted from a:

☐ PLEA OF GUILTY ☐ CONVICTION AFTER TRIAL ☐ FORFEITURE OF BAIL OR SECURITY

That such offense was a:

☐ PETTY MISDEMEANOR ☐ MISDEMEANOR ☐ GROSS MISDEMEANOR ☐ FELONY ☐ JUVENILE TRAFFIC OFFENSE

That as a result of conviction, defendant was:

☐ FINED, \$ _____ (Amount Suspended) _____ ☐ JAILED FOR _____ DAYS.

Recommendation as to Driver's License.

☐ NO RECOMMENDATION ☐ SUSPEND FOR _____ DAYS ☐ NO SUSPENSION

Other Comments: _____

Dated this _____ day of _____, 19____.

Name and Title

If revocation mandatory or suspended recommended, Driver's License must be forwarded with this certificate, M.S. 171.16.

☐ Driver's License forwarded with this certificate.

Certificate must be transmitted within 10 days to Minnesota Department of Public Safety, Motor Vehicle Services Division, State Highway Building, St. Paul, Minnesota 55155.

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TRAFFIC TICKET FORM 2000.9990

STATE OF MINNESOTA COUNTY of _____		ss OFFICER'S COPY		COUNTY COURT DIVISION _____		HP 000 000	
The Undersigned, being duly sworn, deposes and says that on: _____, 19____, at _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Month Day Time </div> <div style="text-align: right;"> <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. </div>							
Name _____ of _____ Street City State Zip				LICENSE INFORMATION			
did unlawfully at _____ Location located in the county and state aforesaid (Operate) (Park) a motor vehicle, to wit:				Drivers License Number _____ State Date of Birth _____			
Make _____ and then and there did commit the following offense:		Registration _____ State _____ Trailer Registration _____		Eyes _____ Height _____ Weight _____ Sex _____		promise to appear in said court at the stated time and place.	
<input type="checkbox"/> SPEEDING (Over Limit) _____ m.p.h. in _____ zone		ROAD TYPE <input type="checkbox"/> Residential <input type="checkbox"/> Rural <input type="checkbox"/> Urban <input type="checkbox"/> Undivided <input type="checkbox"/> Multi-Lane <input type="checkbox"/> Divided <input type="checkbox"/> _____ WEATHER <input type="checkbox"/> Clear/Cloudy <input type="checkbox"/> Rain/Snow <input type="checkbox"/> _____ PAVEMENT <input type="checkbox"/> Normal <input type="checkbox"/> Slippery VISIBILITY <input type="checkbox"/> Normal <input type="checkbox"/> Impaired _____ ACCIDENT <input type="checkbox"/> Property Damage <input type="checkbox"/> Fatal Why _____ <input type="checkbox"/> Personal Injury <input type="checkbox"/> Pedestrian		CIRCUMSTANCES			
<input type="checkbox"/> IMPROPER (Turn) (Passing) (Lane Usage)				(Other Specify) _____ _____ _____			
<input type="checkbox"/> DISOBEYED (Stop Sign) (Semaphore)							
in violation of the (Statute) (Ordinance) Sec. No. _____ in such case made and provided and against the peace and dignity of the State of Minnesota.							
_____ Was offense committed in a manner or under circumstances so as to endanger or be likely to endanger any Yes or No person or property?							
Subscribed and sworn before me this _____ day of _____, 19____				Date of Court Appearance _____ A.M. _____ P.M. _____ 19____ Day _____			
Name _____ Title _____		Complainant Signature _____ Name _____		Department _____ Badge _____		NOTE: Refer to back of Summons for further information.	

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TRAFFIC TICKET FORM 2000.9990

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STATE OF MINNESOTA } COUNTY of _____ } ss SUMMONS		COUNTY COURT _____ DIVISION HP 000 000			
The Undersigned, being duly sworn, deposes and says that on: _____, 19____, at _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Month Day Time <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. </div>					
Name _____ of _____ Street _____ City _____ State _____ Zip _____ did unlawfully at _____ Location _____ located in the county and state aforesaid (Operate) (Park) a motor vehicle, to wit: _____			LICENSE INFORMATION		
			Drivers License Number _____ State _____ Date of Birth _____		
Make _____ Registration _____ State _____ Trailer Registration _____ and then and there did commit the following offense:			Eyes _____ Height _____ Weight _____ Sex _____ CIRCUMSTANCES		
<input type="checkbox"/> SPEEDING (Over Limit) _____ m.p.h. in _____ zone <input type="checkbox"/> IMPROPER (Turn) (Passing) (Lane Usage) <input type="checkbox"/> DISOBEYED (Stop Sign) (Semaphore) <input type="checkbox"/> _____ (Other Specify) _____			ROAD TYPE <input type="checkbox"/> Residential <input type="checkbox"/> Rural <input type="checkbox"/> Urban <input type="checkbox"/> Undivided <input type="checkbox"/> Multi-Lane <input type="checkbox"/> Divided <input type="checkbox"/> _____ WEATHER <input type="checkbox"/> Clear/Cloudy <input type="checkbox"/> Rain/Snow <input type="checkbox"/> _____ PAVEMENT <input type="checkbox"/> Normal <input type="checkbox"/> Slippery VISIBILITY <input type="checkbox"/> Normal <input type="checkbox"/> Impaired _____ ACCIDENT <input type="checkbox"/> Property Damage <input type="checkbox"/> Fatal Why _____ <input type="checkbox"/> Personal Injury <input type="checkbox"/> Pedestrian		
in violation of the (Statute) (Ordinance) Sec. No. _____ in such case made and provided and against the peace and dignity of the State of Minnesota.					
_____ Was offense committed in a manner or under circumstances so as to endanger or be likely to endanger any person or property? Yes or No _____					
Subscribed and sworn before me this _____ day of _____, 19____			Date of Court Appearance _____ A.M. _____ P.M. _____ 19____ Day _____ Time _____		
Name _____ Title _____			Complainant Signature _____ Name _____ Department _____ Badge _____		
			Month _____ Address: _____ _____ _____		

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This space may be used to fit local needs or conditions. However, if a court appearance is not required for every violation and an APPEARANCE, PLEA OF GUILTY AND WAIVER is used it must take the following form.

APPEARANCE, PLEA OF GUILTY AND WAIVER

I, the undersigned, do hereby enter my appearance on the complaint of the offense charged on other side of this summons. I have been informed of my right to a trial, that my signature to this plea of guilty will have the same force and effect as a judgment of court, and that this record will be sent to the Licensing Authority of this State (or of the State where I received my license to drive). I do hereby PLEAD GUILTY to said offense as charged, WAIVE my right to a HEARING by the court, and agree to pay the penalty prescribed for my offense.

(Defendant's Signature)

(Address)

(Driver's License Number)

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Statutory Authority: MS 169.99 subd 2