

CITY OF SANGER MUNICIPAL COURT

309 N. 3rd Street / PO Box 578 / Sanger, Texas 76266 / (940) 458-7131

TO: CITIZEN COMPLAINANT WISHING TO FILE A COMPLAINT AGAINST
ANOTHER CITIZEN

THESE SPECIFIC POINTS ARE UNDERSTOOD BY THE UNDERSIGNED:

1. The citizen must, in good faith, make full, fair and honest disclosure of all facts and circumstances known to him/her at the time the complaint is filed. The facts, as presented, must be in the form of an affidavit and provided under oath. Said affidavit will form the basis of any further investigation and the charging instrument.
2. The citizen-complainant must be sworn and have signed both the application for complaint and the complaint (when prepared by the City Prosecutor).
3. The citizen-complainant must appear in court to testify against the defendant if the charges are contested (the accused pleads not guilty).
4. If the defendant is found guilty, the maximum sentence that may be assessed in Municipal Court is a fine up to \$500. The defendant may appeal the case to a higher court.
5. The defendant may file a counter complaint if the citizen-complainant has also been involved in some illegal activity. Please be advised that any statement made at this time or in the future to a police officer, prosecutor or other city investigative personnel may be used against you should the counter-complaint go forward to trial. Please be advised that when speaking to the prosecutor, that the prosecutor represents the state and no attorney-client relationship is established by any communications with regard to the application for the complaint or any matters related thereto.
6. Once a complaint is filed, only the Municipal Court Judge, upon recommendation of the prosecutor, has the authority to dismiss a complaint.
7. The prosecutor reserves the right to subpoena the presence of the citizen-complainant and enforce the subpoena by ordering a police officer to bring the citizen-complainant to court.

CITIZEN-COMPLAINANT'S SIGNATURE

DATE

APPLICATION FOR COMPLAINT

DATE: _____

YOUR NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ (WORK): _____

NAME OF DEFENDANT: _____

ADDRESS (HOME): _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ (WORK): _____

DESCRIPTION OF DEFENDANT:

RACE: _____ SEX: _____ DATE OF BIRTH: _____

WEIGHT: _____ BODY STYLE: _____ AGE: _____

VEHICLE INFORMATION (IF APPLICABLE):

COLOR: _____ YEAR: _____ MODEL: _____

MAKE: _____ BODY STYLE: _____ LICENSE PLATE: _____

STATE OF REGISTRATION: _____ SPECIAL FEATURES: _____

DATE OF OFFENSE: _____ **TIME OF OFFENSE:** _____

LOCATION OF OFFENSE: _____

TYPE OF PREMISES: _____

LIST OF WITNESSES:

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ (WORK): _____

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ (WORK): _____

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ (WORK): _____

I swear that the statements made herein are within my personal knowledge true and correct.

CITIZEN COMPLAINANT'S SIGNATURE

DATE

COURT CLERK/DEPUTY COURT CLERK

FILING DATE

DO NOT WRITE BELOW THIS LINE

REVIEWED BY: _____

RECOMMENDATION: _____