## IN THE COUNTY COURT OF THE FIFTH JUDICIAL CIRCUIT OF THE STATE OF FLORIDA IN AND FOR HERNANDO COUNTY 20 N. MAIN ST., ROOM 165 - BROOKSVILLE, FLORIDA 34601 - (352) 540-6388

STATE OF FLORIDA vs	COURT DATE:
IN RE: CITATION NUMBER:	CASE NUMBER:
MOTION TO CONT	INUE CIVIL TRAFFIC INFRACTION HEARING
	, and respectfully request the above referenced case be continued to the next available and I agree to waive speedy trial; or
I am an officer of the Agency).	(Law Enforcement
I am unavailable to appear on the previo	usly scheduled court date for the following reason:
Submitted this day of	, 20
Signature of Movant	Daytime phone #
Address	

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STATE OF FLORIDA vs	COURT DATE:
IN RE: CITATION NUMBER:	CASE NUMBER:
ORDER	R ON MOTION TO CONTINUE
Pursuant to the County Judge's	Civil Infraction Policy, your Motion for Continuance is:
Granted and the above matter s	shall be heard at the Hernando County Courthouse, Third Floor
on The above-n	amed defendant is ordered to appear at the above time and
place before the Judge of the County Cou	urt.
<del></del>	eing timely filed (it is less than one week prior to the Scheduled I or subsequent request for a continuance; or,
Date	County Judge
I hereby certify that a copy of the newly s	scheduled court date was provided to the following:
( ) Defendant ( ) Attorney ( ) Officer (	) Witnesses
This day of	, 20
Deputy Clerk	
Defendants Name	
Address	

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the ADA Coordinator at the Office of the Trial Court Administrator, Hernando County Courthouse, 20 North Main Street, Brooksville, Florida 34601, Telephone (352) 754-4402, at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.