REQUEST FOR CONTINUANCE OF TRAFFIC COURT TRIAL OR TRIAL DE NOVO

1	DETERMINE IF YOU ARE ELIGIBLE	You must have requested a Court Trial and received a "Notice to Appear for Court Trial." It must be 2 or more days before the Court Trial hearing date. Any request for continuance must be made pursuant to Penal Code § 1050 and Local Rule of Court 10.08.		
2	COMPLETE FORMS	SC-001 Request for Continuance and Proof of Service.Complete the top half of the form, questions 1 through 4.You MUST provide the court with a phone number and email address.		
3	SERVE THE CITING AGECY	Mail a copy of the SC-001 to the citing agency. The citing agency and address are listed on the bottom of the "Notice to Appear for Court Trial." Complete the bottom half of form SC-001 under Proof of Service.		
4	FILE THE DOCUMENT WITH THE COURT	Email completed form to: slotraffic@slo.courts.ca.gov There is a drop box located at each of the court branch locations. You may drop the completed form off at any location. Paso Robles – 901 Park Street, Paso Robles, CA 93446 Grover Beach – 214 South 16 th Street, Grover Beach, CA 93433 San Luis Obispo – 1050 Monterey Street, San Luis Obispo, CA 93408 Mail completed form to the court at: San Luis Obispo Superior Court Attention: Traffic Department 1050 Monterey Street, Room 220 San Luis Obispo, CA 93408		
5	WAIT FOR DETERMINATION	Once the court receives the documents the judge will either grant or deny your request. A clerk from the court will contact you by phone or email to let you know the outcome and, if granted, the new court date.		

WHERE TO GET FORMS:

Internet: For free, you can log onto <u>https://www.slo.courts.ca.gov/</u> and click on "Forms & Filing" and then click on "Local Forms" and click on "Traffic Forms" then select "SC001 Request for Continuance and POS.'

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO	FOR COURT USE ONLY
214 South 16th Street	, , , , , , , , , , , , , , , , , , ,
Grover Beach, CA 93433	
Phone: 805-706-3600 Email: slotraffic@slo.courts.ca.gov	
PEOPLE OF THE STATE OF CALIFORNIA V.	
DEFENDANT: Pat Sample	•
REQUEST FOR CONTINUANCE AND PROOF OF SERVICE	CASE/CITATION NUMBER:
(Pen. Code, §1050(a), 1050(b))	21T-12345
CASE INFORMATION	
1. Date of Hearing: 04/14/2021	ц.
 Party Requesting to reschedule the hearing: Defendant 	
Attorney	
☐ Officer	
Other:, on behalf of	
(Name of Requestor) (Relation to Party)	(Party)
 REQUEST 3. I request the hearing be rescheduled as follows: After (specify date): 	
06/01/2021	
On a date I am available, which does not include (specify dates):	
Other (specify):	
REASON FOR RESCHEDULING	
4. I have a vacation scheduled during that time and have already purchased airline tickets.	
05/30/2021 bot Samole	
Date Signature of Requestor	
PROOF OF SERVICE	
Check method of service (only one):	•
By personal Service By Email By Mail	🗋 By Fax
1. I am the: 2. Serving:	
Defendant	f
Officer	
Other Other	<u>_</u>
3. I served a copy of this request	
Date: 05/30/2021	
Address: 711 Rockaway Avenue	
4. My name, address, and telephone number (specify):	
 Pat Sample 1234 Main Street, San Luis Obispo, 93408 805-540-1234 I declare under penalty of perjury under the laws of the State of California that the foregoing 	g is true and correct.
05/30/2021	
Date	
	1.
Pat Sample Pat Damp	UL
(NAME OF PERSON WHO SERVED THE PAPERS) (SIGNATURE OF PERS	SON WHO SERVED THE PAPERS)

Local Form SC001 (NEW 04/26/2021)

	RIOR COURT OF CALIFORNIA	A, COUNTY OF SAN	LUIS OBISPO	FOR COURT USE ONLY		
	outh 16th Street					
	r Beach, CA 93433					
Phone	:: 805-706-3600 Email: <u>slotraffic@sl</u>	o.courts.ca.gov		-		
PEOP	LE OF THE STATE OF CALIFOR	NIA V.				
DEFE	NDANT:	•.				
	REQUEST FOR CONTINUA (Pen. Code,	CASE/CITATION NUMBER:				
CASE I	NFORMATION					
1.	Date of Hearing:					
2.	Party Requesting to reschedule the hea Defendant	ring:				
	Attorney					
	Officer					
	Other:	,	on behalf of			
	(Name of Requestor)	(Relation to Party)		(Party)		
REQUE						
3.	I request the hearing be rescheduled as	follows: After (specify date):				
	On a date I am available, which does no	t include (specify dates):				
		Other (specify):				
		Other (speerry).				
	N FOR RESCHEDULING					
4.						
	Date		Signature of Requestor			
Chaolen	nethod of service (only one):	PROOF C	OF SERVICE			
	By personal Service	By Email	By Mail	By Fax		
	By personal bervice	Dy Eman	Dy Mull	Dy Tux		
1.	I am the:		2. Serving:			
	Defendant		Defendant			
	Attorney Officer		Attorney Officer			
	Other		Officer			
3.	I served a copy of this request Date:					
	Address:					
4.						
5.	I declare under penalty of perjury under	s true and correct				
5.	i acciate anaci penaity of perjury unde	. the fame of the State Of	cantonna ana are no foregoing i			
-						
D	ate					

(NAME OF PERSON WHO SERVED THE PAPERS)

(SIGNATURE OF PERSON WHO SERVED THE PAPERS)