Superior Court of California
County of San Luis Obispo
www.slo.courts.ca.gov

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	TR001 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 TR001 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 TR001 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 16th 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 https://www.slo.courts.ca.gov/ and click on "Forms & Filing" and then click on "Local Forms" and click on "Traffic Forms" then select "TR001 Request for Continuance and POS.'

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO 214 South 16th Street Grover Beach, CA 93433 Phone: 805-706-3600 Email: slotraffic@slo.courts.ca.gov	FOR COURT USE ONLY
PEOPLE OF THE STATE OF CALIFORNIA V. DEFENDANT: Pat Sample	
REQUEST FOR CONTINUANCE AND PROOF OF SERVICE (Pen. Code, §1050(a), 1050(b))	CASE/CITATION NUMBER: 21T-12345

CASE INFORMATION

1. Date of Hearing: 04/14/2021

2. Party Requesting to reschedule the hearing:
   - ☑ Defendant
   - ☐ Attorney
   - ☐ Officer
   - ☐ Other: _____ (Name of Requestor), _____ (Relation to Party) on behalf of _____ (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 (Date) — Pat Sample (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:
   - ☑ Defendant
   - ☐ Attorney
   - ☐ Officer
   - ☐ Other _____

2. Serving:
   - ☐ Defendant
   - ☐ Attorney
   - ☑ Officer
   - ☐ Other _____

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

5. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

05/30/2021
Date

Pat Sample
(NAME OF PERSON WHO SERVED THE PAPERS)

Pat Sample
(SIGNATURE OF PERSON WHO SERVED THE PAPERS)

SAMPLE

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO 214 South 16th Street Grover Beach, CA 93433 Phone: 805-706-3600 Email: slotraffic@slo.courts.ca.gov	FOR COURT USE ONLY
PEOPLE OF THE STATE OF CALIFORNIA V. DEFENDANT:	
REQUEST FOR CONTINUANCE AND PROOF OF SERVICE **(Pen. Code, §1050(a), 1050(b))**	CASE/CITATION NUMBER:

CASE INFORMATION

1. Date of Hearing: _____

2. Party Requesting to reschedule the hearing:
   - ☐ Defendant
   - ☐ Attorney
   - ☐ Officer
   - ☐ Other: _____ (Name of Requestor) , _____ (Relation to Party) on behalf of _____ (Party)

REQUEST

3. I request the hearing be rescheduled as follows:

   After (specify date): _____

   On a date I am available, which does not include (specify dates): _____

   Other (specify): _____

REASON FOR RESCHEDULING

4. _____

_____

_____ _____

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:
   - ☐ Defendant
   - ☐ Attorney
   - ☐ Officer
   - ☐ Other _____

2. Serving:
   - ☐ Defendant
   - ☐ Attorney
   - ☐ Officer
   - ☐ Other _____

3. I served a copy of this request

   Date: _____

   Address: _____

4. My name, address, and telephone number (specify):

   _____

5. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

_____

Date

_____ _____

(NAME OF PERSON WHO SERVED THE PAPERS) (SIGNATURE OF PERSON WHO SERVED THE PAPERS)