



CITY OF BUFFALO
TRAFFIC VIOLATIONS AGENCY
CERTIFICATE OF DISPOSITION REQUEST FORM

- 1) **Research fee due upon submission – Enclose a check or money order for \$5.00 payable to the CITY OF BUFFALO. *DO NOT send cash--convert cash into a money order.**
- 2) **If your case was disposed of prior to July 1, 2015 your case file remains in the custody of the DMV and the records *cannot* be accessed by this agency. You must contact the DMV in Albany at 718-488-5710.**

Is the person requesting the Certificate of Disposition the defendant? Yes No

If Yes, complete only Section 2.

If REQUESTOR is NOT the DEFENDANT, please complete both Section 1 AND Section 2.

Date of Request: _____

SECTION 1 – REQUESTOR IS NOT THE DEFENDANT

Name of Requestor:	_____
Address of Requestor:	_____ _____
<i>Signature of Requestor:</i>	_____

SECTION 2 – DEFENDANT/CASE INFORMATION

Name of Defendant: _____	Date of Birth: _____
Date of Violation: _____	Case # (if known): _____
Original Charge(s): _____	
Defendant's Mailing Address: _____ _____	
 You must enclose a self-addressed and stamped envelope and your payment of \$5.00. <hr/>	
If the Defendant is the requestor, the Certificate will be mailed to the address in Section 2. If the requestor is anyone other than the Defendant, the Certificate will be mailed to the address of the requestor in Section 1.	
<i>Signature of Defendant:</i> _____	

For Office Use Only: Receipt No. _____ Funds Collected: \$_____ Clerk's Initials _____
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Mailing Address & Physical Filing Address:

65 NIAGARA SQUARE / 115 CITY HALL / BUFFALO, NY 14202-3399