Kirkland Municipal Court
PO BOX 678
Kirkland, WA 98034

DECLARATION OF NON-RESPONSIBILITY

☐ **City of Kirkland,**
☐ **City of Woodinville,**

Plaintiff,

vs. _____
Defendant

Infraction #:_____

License Plate #:_____

State of Plate:_____

In the space above, you must accurately write the Infraction # that appears in the box in the upper right of the front of the Notice of Infraction. Provide the license plate and state for the vehicle involved. Write clearly and accurately; if the Infraction # is unclear or incorrect, the Court will not be able to match your Declaration to the Notice of Infraction. Photo infractions will NOT appear on your driver's license records at the Department of Licensing. However, failure to pay/respond by the due date may result in additional penalties, collection action and/or notification to the Department of Licensing to hold vehicle registration.

EMPLOYER-OWNED VEHICLES: A Declaration of Non-Responsibility may not be used by employers/principals to transfer responsibility to their employees/agents. A vehicle registered to an employer/principal that is driven by an employee/agent remains in the "care, custody, and control" of the employer/agent and thus, the employer/principal is responsible for payment of a photo infraction by submitting payment directly to the court or by requesting a hearing in his or her name.

I received the Notice listed above. At the time of the occurrence indicated in the Notice, the vehicle described in the Notice was:

☐ **Sold prior to the infraction (include a copy of either a bill of sale OR a copy from your insurance company showing when vehicle was taken off of policy and provide the new owner's name and address below)**

☐ **Stolen prior to the infraction and a copy of the police report is attached.**

☐ **Not in my care, custody or control (provide the driver's name and address below)**

Name: _____

Address: _____
Street (including unit #) City State Zip

☐ **Other:** _____

_____

_____

Your Declaration will be reviewed by the Kirkland Municipal Court and is contingent upon receipt of the above information. Failure to provide the requested information may result in a scheduled hearing or the infraction being found committed.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

_____ _____
Signature of Registered Owner 1 *Signature of Registered Owner 2*

_____ _____
Date and Place signed *Date and Place signed*

_____ _____
Printed Name of Registered Owner 1 Printed Name of Registered Owner 2

_____ _____
Email of Registered Owner 1 Email of Registered Owner 2

Address:_____Unit#:_____ City:_____ State:_____ Zip:_____

Mail to: Kirkland Municipal Court PO BOX 678 Kirkland, WA 98083-0678 or email to: court@kirklandwa.gov