



**School Bus Stop Arm Program**

**AUTOMATED SCHOOL BUS STOP ARM CITATION HEARING AND REFUND PROCESS**

**YOU MUST BE THE REGISTERED OWNER OF THE VEHICLE LISTED ON THE CITATION TO APPEAL A CITATION:**

1). You may pay your citation or request an administrative hearing within 30 days of first notice of the date of violation. All hearing requests must be mailed to the Adjudication office at the following location:

Lancaster School Bus Stop Arm Program  
P.O. Box 224628  
Dallas, TX 75222

Payment(s) can be mailed to Dallas County Schools (DCS) at:

Lancaster School Bus Stop Arm Program  
P.O. Box 227177  
Dallas, TX 75222

2). If you are not satisfied with the results of your adjudication hearing, the registered vehicle owner may appeal to Lancaster Municipal Court. An appeal and notarized promissory form are required and must be fully completed to file an appeal. See required form attached.

**Note: All documents must be mailed to the adjudication office as listed above excluding the filing fee.**

You will be contacted by the hearing administrator once the appeal forms have been received. At that time, you will be instructed to pay the \$15 municipal appeal hearing filing fee at:

Lancaster Municipal Court  
220 West Main Street  
Lancaster, TX 75146

Once all required appeal forms and the appeal fee are received, the court will contact all parties with the date of the appeal hearing. For more information regarding an appeal or a refund on your \$15 filing fee, you may contact Lancaster Municipal Court Clerks Monday-Friday 8:00am-5:00pm at 972-218-1334.

3). If your case is dismissed and you already paid your citation fine, you may be due a refund. To inquire about a possible refund on your citation (not the filing fee): please call 1-855-786-7276, M-F 8:00-5:00pm.

This information will be required when inquiring about a refund on your paid citation:

- a) Citation number
- b) Some type of proof of citation payment: payment receipt, confirmation receipt, credit card statement (excluding personal information) etc.



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**NOTARIZED STATEMENT OF PERSONAL FINANCIAL OBLIGATION**

Cause No. \_\_\_\_\_

I, \_\_\_\_\_, acknowledge and understand that pursuant to Section 22.13.012 (d) of the Lancaster City Code, an appeal petition must be accompanied by a notarized statement in which the vehicle owner agrees to pay all civil fines, penalties, and costs ordered by the hearing officer, if the person is still found liable by the municipal court upon appeal. Accordingly, I agree to pay all civil fines, penalties, and costs ordered by the hearing officer in this cause if upon appeal to the Lancaster Municipal Court I am found liable for this school bus stop arm violation.

I further acknowledge and understand that if I fail to pay all civil fines, penalties, and costs ordered by the municipal court upon a finding of liability, I may be subject to legal action, including formal collections procedures and/or a civil lawsuit for a collection of the civil fine, penalties, and costs.

\_\_\_\_\_  
Affiant

SWORN TO AND SUBSCRIBED before me on the day \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Texas

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
My Commission Expires



**School Bus Stop Arm Program**

**PETITION FOR APPEAL TO THE CITY OF LANCASTER MUNICIPAL COURT FROM AN ADMINISTRATIVE ADJUDICATION OF A LANCASTER SCHOOL BUS STOP ARM CITATION**

I, \_\_\_\_\_ request to appeal to the City of Lancaster Municipal court the judgment rendered in the hearing held \_\_\_\_\_, 20\_\_\_\_ for a school bus stop arm ticket, ticket number: TX-\_\_\_\_\_. Initial here if you wish to have the Hearing Officer present at the appeal hearing\_\_\_\_\_.

I attest that a copy of the hearing order and school bus arm ticket are attached to this petition. I understand that I must pay a \$15 refundable\* filing fee to process this appeal. I further attest that this petition has been filed within 30 days from the date of the hearing. I believe the decision made at the hearing was wrong for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sign: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Address \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Petition and fee accepted by: \_\_\_\_\_ Date: \_\_\_\_\_  
Receipt#: \_\_\_\_\_

**\*refundable only if dismissed**

**PETICION PARA APELAR A LA CORTE MUNICIPAL DE LA CIUDAD DE LANCASTER DE UNA ADJUDICACION ADMINISTRATIVA POR UNA INFRACCION POR OMITIR EL PARE DE BRAZO DE UN AUTOBUS ESCOLAR DE LA CIUDAD DE LANCASTER**

Yo, \_\_\_\_\_ deseo apelar a La Corte Municipal de la Ciudad Lancaster, el veredicto emitido en la audiencia sostenida el día \_\_\_\_\_ de \_\_\_\_\_ de 20\_\_\_\_ debido a una violación de parada de autobús: Numero de infracción: TX-\_\_\_\_\_. Inicie aquí si desea la presencia de un oficial de audiencia durante su apelación \_\_\_\_\_.

Yo declaro que las copias de la orden de la audiencia y de la infraccion han sido adheridas a esta petición. Reconozco que un pago reembolsable\* de \$15, deberá pagarse para procesar esta aplicación, y confirmo a la vez que esta petición será presentada dentro de los primeros 30 días a partir de la fecha de la audiencia. Considero que la decisión hecha en la audiencia es incorrecta por las siguientes razones:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Firma: \_\_\_\_\_ Nombre: \_\_\_\_\_ Fecha: \_\_\_\_\_  
Teléfono: \_\_\_\_\_ Dirección: \_\_\_\_\_  
Ciudad: \_\_\_\_\_ Estado: \_\_\_\_\_ Código Postal: \_\_\_\_\_  
Petición y pago recibido por: \_\_\_\_\_ Fecha: \_\_\_\_\_  
#de Recibo: \_\_\_\_\_ **\*Reembolsable solo si es despedido**

