

PHOENIX MUNICIPAL COURT

NCIC# AZ007101J / DPS# 0741 300 W. Washington St. Phoenix, AZ 85003-2103 602-262-6421 TTY: Use 7-1-1

STATE OF ARIZONA -v- Defendant (First, MI, Last) _____ Date of Birth _____	Plaintiff Complaint No. _____	PETITION TO SEAL CRIMINAL CASE RECORDS A.R.S. § 13-911
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Person Filing _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email Address _____

Petitioner is: Defendant Attorney for Defendant Attorney Bar No. _____

Read A.R.S. § 13-911 in its entirety before completing this petition. This petition is intended to help those who are seeking to seal a criminal case record under A.R.S. § 13-911 and refers solely to the records that exist under the control of criminal justice entities including the courts, Department of Public Safety, prosecutor’s offices and law enforcement agencies. Any case record that was published or distributed prior to sealing may still be accessible and may not be impacted by the granting of an order to seal case records.

NOTE: Items marked with an asterisk (*) are required fields.

The above-named petitioner, pursuant to A.R.S. § 13-911, hereby requests that the Court order the sealing of petitioner’s criminal case records. As grounds for this petition and under penalty of perjury, petitioner states as follows:

SECTION I. CASE RECORDS RELATED TO A CRIMINAL OFFENSE

1. PETITIONER’S INFORMATION (required)*

- a. Petitioner’s name* _____
- b. Petitioner’s address* _____
- c. Date of birth* _____ d. Email Address* _____
- e. Name at the time of arrest, if not the same as above* _____

2. CASE RECORD INFORMATION (required)*

- a. What were you charged with _____
 - b. Court in which case disposition was made or would have been made if charges were filed _____
 - c. Court case number if charges were filed _____
 - 1. Charge I _____ 2. Charge II _____
 - 3. Charge III _____ 4. Charge IV _____
- Additional charges continue on a separate page.

3. ADDITIONAL CASE RECORD INFORMATION (if known)

- a. Location of arrest _____
- b. Name of the arresting agency _____
- c. Date of arrest _____
- d. Name of the prosecuting agency if charges were filed _____

To request this document in an alternative format, please call 602-262-1625 or TTY: Use 7-1-1.

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SECTION I. CASE RECORDS RELATED TO A CRIMINAL OFFENSE (CONTINUED)

4. DESCRIBE YOUR SITUATION (required)*

You must check at least one box that applies.

- I was arrested for a criminal offense and no charge(s) were filed. If checked, please go to Section III.
- I was charged with a criminal offense and the charge was later dismissed or resulted in a not guilty verdict at trial. A dismissal or not guilty verdict was entered on _____. If checked, please go to Section III.
- I was convicted on a criminal offense and a judgment of guilt was entered on _____. If checked, please go to Section II.

SECTION II. SENTENCE COMPLIANCE (required if you were convicted and a judgment of guilt entered)

1. I have completed all required monetary terms of the sentence, including outstanding fines, fees, restitution, or other court-ordered financial obligations.* Yes No N/A.
2. I have completed all other terms of the sentence, such as incarceration, probation, employment, classes, drug/alcohol testing, or other requirements.* Yes No N/A.
3. The requisite period of time has passed since I completed my conditions of probation, or sentence and was discharged by the court.* Yes No N/A.

You MAY NOT file this petition if you checked "No" to questions 1, 2, or 3 above.

SECTION III. PRIOR SEALING OF RECORD(S) (required)*

1. Have you previously petitioned to seal case records on this case?* Yes No
 If yes, what was the date of your last petition?* _____. What was the result (circle one)? Dismissed / Denied

SECTION IV. OTHER INFORMATION FOR THE COURT

1. Is there anything you would like the court to take into consideration? _____

2. Attached is other pertinent documentation (non-originals). List attached documents:

THIS PETITION MAY BE DENIED IF INFORMATION IN THIS PETITION IS FOUND TO BE INACCURATE. I RECOGNIZE, I MUST NOTIFY THE COURT OF ANY NEW CHARGES THAT ARE FILED AGAINST ME AFTER THIS PETITION IS FILED REGARDLESS OF STATE OR JURISDICTION.

Note, if you filed an appeal from Phoenix Municipal Court regarding the charges that you seek to be sealed, you must also file a petition in Maricopa County Superior Court, if you want those appeal records also sealed.

PETITIONER'S OATH OR AFFIRMATION I declare under penalty of perjury that the information I have provided in this petition and any attachments is true and correct to the best of my knowledge.

Petitioner's Signature Date

AUTHORIZATION TO PROCEED ON BEHALF OF PETITIONER, IF APPLICABLE

I authorize _____, Attorney, to petition the Phoenix Municipal Court, to take the above-indicated action.

Petitioner's Signature Date

To the best of my knowledge, the information provided in this petition is true and correct

Attorney's Signature Print Name

Attorney's Address City State Zip