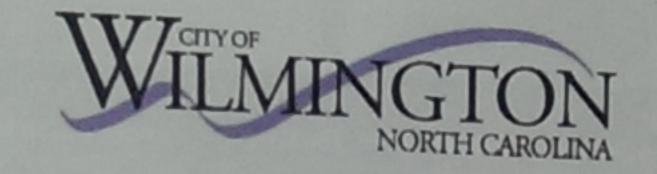
City of Wilmington SafeLight Program PO Box 1810 Wilmington, NC 28402





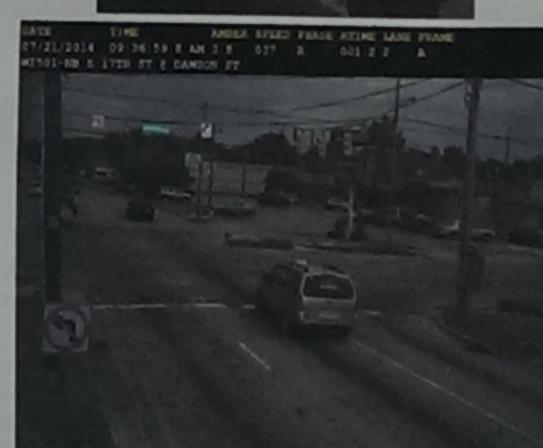
CITATION #: 2591400121493 COMPLAINT #: WM-140083287

PIN: 6213

View your violation and pay with your Visa or MasterCard at www.ViolationInfo.com

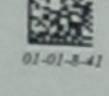
Amount Due: \$50.00 Due Date: 09/03/2014







NOTICE OF CITATION



C42140B

01827 1 AT 0.403 T 14 00-ATPSCR1D-1 JAMES P ZOLA 1013 HUNTING RIDGE RD WILMINGTON NC 28412-7424

ON/Date 07/21/2014		AT TIME 09:37 AM	AT LOCATION NB S 17TH ST @ DAWSON ST			
-III	YEAR 2006	MAKE CHEVROLI	Control of the last of the las	MODEL UPLANDER LT	STYLE	COLOR
CLIM	7-0	NUMBER TA9899				STATE NC

Your vehicle was photographed (copies are shown) entering an intersection in which the traffic signal was red, in violation of Wilmington City Code 5.46.3. The civil penalty for this violation is \$50.00. No points will be assessed against your driving record or insurance as a result of this violation. Please see reverse side for payment option and for a description of the information in the Data Block shown above in the photographs.

This program has been designed to increase roadway safety, reduce red light violations and prevent injuries. If you have any questions regarding this citation, please visit our internet site at www.ViolationInfo.com or call Customer Service at 1-910-343-4762.

Important Notice: Failure to pay the civil fine by the due date shown above will result in a late penalty of \$50.00. Request for appeals and transfer of responsibility must be received by the due date above or your right to appeal will be waived.

Pay with your Visa or MasterCard at www.ViolationInfo.com or mail your check or money order with this coupon to the address below.





 NAME:
 JAMES P ZOLA
 DUE:
 09/03/2014

 CITATION #:
 2591400121493
 VERSION:
 1
 ISSUED:
 08/01/2014

 COMPLAINT #:
 WM-140083287
 PLATE:
 TA9899
 STATE:
 NC

Make your payment by mail or by phone (see back for details).

Make your check or money order payable to City of Wilmington.

DO NOT MAIL CASH.

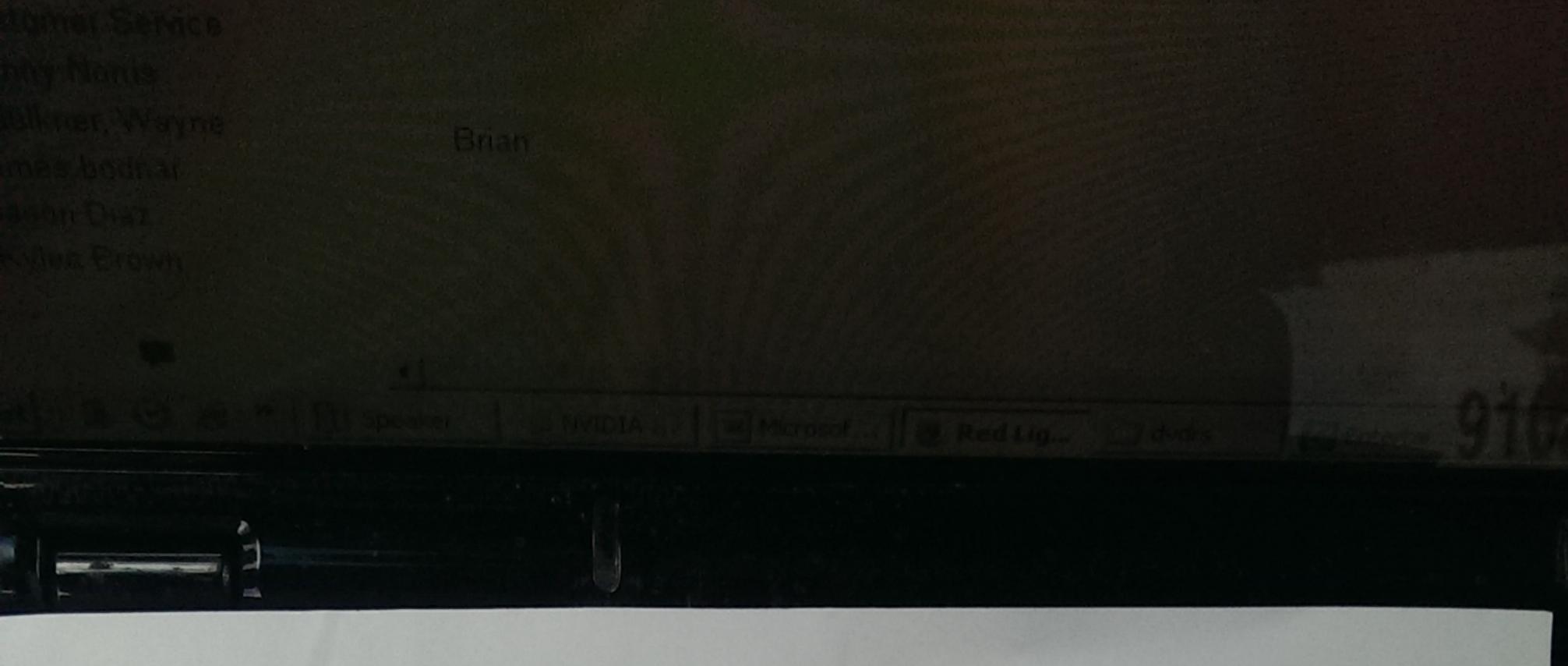
Write the Citation # on the front of your payment.

Do not tape, staple or paperclip items.

Insert this tear-off coupon in the enclosed envelope with the address (at the right) showing through the window.

1 2591400121493 000024006213 050005

AMOUNT DUE: \$50.00



Data Bar Example

DATE TIME mm/dd/yyyy hh:mm:ss Camera # - Location of Violation AMBER TIME amber seconds

SPEED approx MPH

PHASE R=Red RED TIME red seconds

FRAME LANE

INSTRUCTIONS

If this infraction was a right turn on red, please visit the website to review the video of the infraction.

ONLINE PAYMENT: The fastest and easiest way to pay your Notice is to pay online. Go to www.ViolationInfo.com and logon with your Citation # and PIN shown in the red box on the front of this notice. Click the Pay button. There is a \$4.00 convenience fee.

PAYMENT BY PHONE: Call 1-910-343-4762 between 8:00 AM and 5:00 PM EST Monday-Friday or toll free 1-866-790-4111 weekends, holidays and after hours to make a payment. There is a \$4.00 convenience fee for phone payments. From the toll free line you can also check your balance, get an updated status of your appeal hearing or transfer of liability.

PAYMENT BY MAIL: Mail your check or money order (payable to City of Wilmington) in the enclosed envelope with the coupon printed at the bottom of the reverse side of this notice. DO NOT MAIL CASH. Be sure to put the Citation # (see reverse) on the face of your payment.

PAYMENT IN PERSON: You may pay in person by cash, check, money order, Visa or MasterCard at City of Wilmington, 305 Chestnut Street, 1st Floor, Wilmington, NC 28401, Monday through Friday between the hours of 8:00 AM and 5:00 PM EST.

VIEW YOUR IMAGES AND VIDEO: The recorded images and video of your violation will be submitted as evidence in the hearing for disposition of the violation. You may view your images and video online at www.ViolationInfo.com. You will need your Citation # and PIN printed on the front of this notice inside the red box.

THERE ARE TWO WAYS TO CONTEST THIS VIOLATION:

- (1) You may contest the imposition of this civil penalty by signing and mailing the coupon below to request a hearing. Your request must be received by the Due Date stated on the front of this Notice and must include a written notice of why you feel you were issued this citation in error. Upon receipt, you will be notified of the date, time and location of your Hearing. You must also mail a deposit in the amount of \$50.00 along with your request. This deposit constitutes a bond. If the citation is upheld, the \$50.00 deposit will satisfy your payment obligation and no additional funds will be due. If the citation is dismissed, your deposit will be refunded to you.
- (2) If the basis of your contest is one of the affirmative defenses outlined in the Wilmington City Code Section 5.46.3, you may complete an Affidavit of Non-Responsibility and attach supporting documentation. Your affidavit and supporting documentation will be reviewed and will result in either dismissal of this violation or scheduling of an administrative hearing. You will be notified in writing of any action taken.

You may download an Affidavit of Non-Responsibility at www.ViolationInfo.com. You will need your Citation # and PIN printed on the front of this notice to download the Affidavit. If you cannot download the form, you should contact Customer Service and a form will be mailed to you. The Affidavit must be completed, signed, and mailed, with all supporting documentation, to the City of Wilmington, Red Light Camera Program, PO Box 1810, Wilmington, NC 28402 and it must be received by the Due Date stated on the front of this Notice.

QUESTIONS: If you have any questions, please contact Customer Service toll free at 1-910-343-4762 from 8:00 AM-5:00PM EST.

IF YOU ARE A RENTAL CAR COMPANY, send your letter identifying the driver along with the copy of this Notice to: City of Wilmington, SafeLight Program, PO Box 1810, Wilmington, NC 28402.

USE THIS FORM TO REQUEST A APPEAL COURT DATE

Note any corrections to your name and address as they appear on the reverse side of this form. Return this signed form at least 5 days prior to the Due Date to ensure that it is received by the Due Date on the reverse side of this form. You must also mail a deposit in the amount of \$50.00 payable to City of Wilmington along with your request together with a written notice of why you feel you were issued this citation in error. You will be notified by mail of your court date, time, and location. I have reviewed the images and verbiage on this citation. I CONTEST THIS CITATION AND REQUEST A HEARING. Do not sign unless you are requesting a court hearing. Please sign and print name using blue or black ink.

Signed:	Date:			
Drinted Name:	Phone:			