	For Clerk's Use Only
Person Filing:	
Address (if not protected):	
City, State, Zip Code:	
Telephone:	
Email Address:	
Representing \Box Self or \Box Attorney for	
Attorney's Bar Number:	

PIMA COUNTY CONSOLIDATED JUSTICE COURT

STATE OF ARIZONA

-vs-

Defendant (FIRST, MI, LAST)

OR if no charges were filed:

In Re the Matter of:

Case Number: _____

PETITION TO SEAL CRIMINAL CASE RECORDS (ARS § 13-911)

Name (FIRST, MI, LAST)

Read ARS § 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 ARS § 13-911 and refers solely to the records that exist under the control of the courts, Department of Public Safety, prosecutors' 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.

Pursuant to ARS § 13-911, Petitioner hereby petitions the court to order the sealing of the following criminal case records related to Petitioner, as indicated in this petition. (*Check only those that apply*)

- Arrest records of an arrest occurring on or about _____ [insert date] by the following law enforcement agency: _____
- □ Charging documents created by the following prosecuting agency (*Do not check this box if no charges were filed*):______

Case Number:

 \square All records relating to the eligible charge(s) in court case number: _____.

As grounds for this petition, 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 or the offense for which you were arrested if no charges were filed:
- b. Court that adjudicated the charge(s) or if charges were not filed, the court that would have adjudicated the charge(s):______

c. Court case number if charge(s) were filed:

- 1. Count I: _____
- 2. Count II:
- 3. Count III: _____
- 4. Count IV: _____

□ Additional counts continue on a separate page.

d. If no charges were filed, did you have an initial appearance? \Box Yes \Box No.

If you marked "yes," was your initial appearance in this court? \Box Yes \Box No.

IMPORTANT: If no charges were filed but you had an initial appearance, you MUST file <u>in</u> <u>the court where you had your initial appearance</u>. If you were arrested but no initial appearance was held, you must file in the superior court in the county where you were arrested.

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:
- e. Name of the justice court and the justice court case number if the case was initially filed in a justice court but was transferred to the superior court.

4. DESCRIBE YOUR SITUATION (required)*

You must check at least one box that applies to your situation.

□ I was arrested for a criminal offense and no charges were filed. If checked, please go to Section III.

□ I was charged with one or more criminal offenses and the charge(s) were subsequently dismissed or resulted in a not guilty verdict at trial. A dismissal or not guilty verdict was entered on _____.

□ I was charged with a criminal offense and a judgment of guilt was entered on _____.

SECTION II. SENTENCE COMPLIANCE

I have satisfied all required monetary terms of the sentence, including outstanding fines, fees, restitution, or other court-ordered financial obligations.*
 Nes D Nes

 \Box Yes \Box No \Box N/A.

- 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. I have received an absolute discharge from the Arizona Department of Corrections.*

 \Box Yes \Box No \Box N/A. (If you checked "yes," it is strongly encouraged that you attach a certificate of absolute discharge.)

4. I have been discharged from probation.*

□ Yes □ No □ N/A. (If you checked "yes," it is strongly encouraged that you attach a copy of your order of discharge.)

You cannot file this petition if you checked "no" to question 1, 2, 3, or 4 above.

Case Number:

SECTION III. PRIOR SEALING OF RECORD(S)

Have you previously filed a petition to seal case records under ARS § 13-911 in this case?
 □ Yes □ No.

If yes, what was the date of your last petition?

2. Have you had case records sealed under ARS § 13-911 in a previous case?
□ Yes □ No.

If yes, what was the date you completed the non-monetary conditions of probation or sentence and were discharged by the court?

SECTION IV. OTHER INFORMATION FOR THE COURT

- If you are filing this petition to have a conviction sealed, have you been convicted of any other offense since the conviction for which you are asking the court to seal records?
 □ Yes □ No □ N/A.
- 2. Are there any pending charges that you are aware of that have been filed against you?
 □ Yes □ No □ Unknown.
 - a. If you have additional pending charges, please provide:
 - i. Jurisdiction:
 - ii. Charges filed:
 - iii. Date of the charges:
- 3. Unless the petitioner, prosecutor, or victim requests a hearing, the court may grant or deny a petition without a hearing. Do you request a hearing? \Box Yes \Box No.
- 4. Is there anything else you would like the court to consider regarding this petition?
- 5. \Box Attached is other pertinent documentation (non-originals). List attached documents:

DECLARATIONS AND ACKNOWLEDGEMENTS

I declare under penalty of perjury that the information I have provided in this petition and any attachments are true and correct to the best of my knowledge.

I understand that this petition may be dismissed if the information I have provided is insufficient. I also understand that this petition may be denied if information in this petition is found to be inaccurate.

Date

Petitioner / Petitioner's Attorney Signature

Printed Name: ______Address: ______

NOTICE

You must notify the court of any new charges that are filed against you after this petition is filed, regardless of state or jurisdiction.

If you filed an appeal from a limited jurisdiction court regarding the charges that you seek to have sealed, you must also file a petition in superior court if you want those records sealed.

Original: Court

Copy of petition to:

County Attorney via: _____ email _____ pick-up bin

Defendant via: _____mail _____email _____pick-up bin

Date:_____ Clerk:_____