

REQUEST FOR TRAFFIC RESEARCH
MAIL & FAX REQUESTS/PHONE REQUESTS/WALK IN CUSTOMERS

The following is required by the Clerk's Office to conduct a records search.

PLEASE PRINT.

- Complete Name of Individual: _____
- Date of Birth: _____
- Ticket number or Case number if known: _____
- Type of Charge/Offense if known: _____
- Date of Charge/Offense if known: _____
- If ticket has been paid list date or time frame paid: _____
- Drivers License Number: _____

In addition to above, please select and complete the following where appropriate:

Type of Document Required:

- D-6 Clearance Form: _____
- Copy of ticket if available _____
- Copy of Disposition _____

The Clerk of courts is required to charge a service fee for furnishing this information and costs are in accordance with Chapter 28.24, Florida Statutes and is listed below:

- Duplicate D-6 Clearance Form \$7.00 per each form needed
- Search of records – each year. \$1.50
- Copies of documents – each page \$1.00
- Certifying copies of documents \$2.00

Upon completion, please mail a copy with the appropriate fee to the Traffic Division. You will be notified in approximately **48 hours** by mail with the requested documents or status of this request. Please note: Payment must be received prior to research of your request.

- Individual requesting information: _____
- Address: _____
- _____
- Date: _____
- Phone Number: _____

For further information, please contact the Traffic Division by Area Code (904) 819-3628

**Mailing Address: Clerk of St. Johns County – 4010 Lewis Speedway St Augustine,
Florida 32084 Attn: Traffic/Research Fax No. 904 819-3691**