

NOTICE OF ELECTION TO BE TRIED IN COURT – AARTO 10

INSTRUCTIONS FOR COMPLETION OF THE FORM

- a. This form must be completed in black ink and posted by registered mail to the following address: **AARTO - Court, Private Bag X147, Pretoria, 0001.**
- b. This form may also be electronically obtained, completed and submitted at the following Internet website: **www.aarto.co.za**
- c. This form may also be faxed to the following number: **011 256 1045**
- d. A copy of the completed form must be kept for your own records.
- e. The Issuing Authority will contact you within 21 days to arrange a court date, failing which this form must be resubmitted as described in (a) above.
- f. Individuals need not complete the first two lines of Part B. Organisations must provide the details of the registration number of the organisation (eg CC, company or trust registration number) and details of a representative (Surname, First names, ID number, Cell, Email, etc.) who must sign the form on its behalf.



PART A – NOTICE

- a. I, the particulars of whom are provided under Part B below, hereby give notice in terms of sections 22(2)(a) of Act 46 of 1998, that I elect to be tried in court on the charge of having committed the alleged infringement on the Infringement Notice that was issued to me, the particulars of which are provided under Part C below.
- b. The declaration in support of this election is given under Part D below.

PART B – INFRINGER AND MOTOR VEHICLE PARTICULARS

Name of organisation: _____	Registration number: _____
Type of organisation: <input type="checkbox"/> Company <input type="checkbox"/> CC <input type="checkbox"/> Partnership <input type="checkbox"/> Other: _____	
Surname: _____	Tel (home): (____) _____
First names: _____	Tel (work): (____) _____
Initials: _____ Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Fax: (____) _____
Date of birth (YYYY/MM/DD): ____/____/____	Cell: _____
ID Type: <input type="checkbox"/> RSA <input type="checkbox"/> Passport <input type="checkbox"/> Foreign ID <input type="checkbox"/> Driving Licence	Email: _____
ID number: _____	Employer name: _____
Country of issue: _____	Employer address: _____
Licence code: <input type="checkbox"/> A1 <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C1 <input type="checkbox"/> C <input type="checkbox"/> EB <input type="checkbox"/> EC1 <input type="checkbox"/> EC <input type="checkbox"/> None <input type="checkbox"/> Foreign code: _____	
Learner code: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	
PrDP code: <input type="checkbox"/> Goods <input type="checkbox"/> Passengers <input type="checkbox"/> Dangerous	
Street address: _____	
Postal address: _____	
Code: _____	

MOTOR VEHICLE PARTICULARS

Vehicle licence: _____
Licence disc no: _____
Operator card no: _____
Vehicle description (type): _____
Vehicle GVM: _____ kg
Make: _____
Series (model): _____
Colour: _____

PART C – PARTICULARS OF INFRINGEMENT NOTICE

Infringement Notice number: _____ - _____ - _____	
Date of infringement (YYYY/MM/DD): ____/____/____	Issuing Authority: _____

PART D – DECLARATION

I shall accept service of process, notices or documents in respect of this matter at the following residential or business street address:

I declare that the above particulars are true and correct and realise that a false declaration is punishable by fine or imprisonment or both. I am aware that I must notify the Agency and the appropriate registering authority of any changes of particulars.

Signature: _____ Date(YYYY/MM/DD): ____/____/____