



FAUQUIER COUNTY, VA SHERIFF'S OFFICE

AFFIDAVIT OF REBUTTAL

| | | |
|--------------------------------------|------------------------------|-----------------------------|
| Summons Number: (Full Number) | License Plate Number: | License Plate State: |
|--------------------------------------|------------------------------|-----------------------------|

Under C.O.V. § 46.2-882.1, the registered owner receiving the summons, but was not operating the vehicle at the time the violation occurred, may present an Affidavit of Rebuttal. The affidavit must be filed within 30 days of the issue date. Please write clearly and make sure you record the information- accurately. **Information of the person who was in care, custody, or control of the vehicle at the time of the alleged violation must be provided below and the form must be notarized.** **All fields are required unless otherwise stated. Incomplete forms will be denied.**

| Registered Owner's Information | | | | Driver's Information | |
|-------------------------------------|---------------------|----------------------|---------------|----------------------|-----------------------|
| Printed Name: | | | | Printed Name: | |
| Street#: | Street Name: | Apt/Unit/Lot# | | | |
| City: | | | State: | Zip: | Apt/Unit/Lot#: |
| Registered Owner's Signature | | | Date: | City: | |
| Phone #: | | | State: | | Zip: |

I received the summons and at the time of the violation,

- Another party was operating the vehicle at the time of the violation. The designated party who may be held liable for the violation is provided above.
- Vehicle was stolen and was operated by a person other than the registered owner (include copy of the police report)
- Vehicle license plate and/or tag was stolen (include a copy of the police report)
- Commercial motor vehicle and the ticket is issued to a corporate entity)

| | |
|--|------------|
| State of: | County of: |
| SUBSCRIBED AND SWORN before me on this _____ day of _____, | |
| | |
| Notary Public | |

Mail This Form To:
Fauquier General District Court
 6 Court St
 Warrenton, VA 20186

For any questions, Contact us:
 By Phone: 1-855-252-0086

***I declare under penalty of perjury under the laws of the State of Execution of this form that the information provided in this declaration is true and correct to the best of my knowledge. ***