Court:				
Colorado City/Town or County:				
Court Mailing Address.:				
Parties:				
Plaintiff: The People of the City/Town of				
V.				
Defendant: This box is for court use onl	V.			
Filed by:	, .			
Name: Case				
Mailing Address.: Number:				
Division:				
Phone Fax: Courtroom:				
Email: Bar Number: Courtroom:				
Petition to Seal Municipal Conviction Records				
The Petitioner is: (check one only)				
the Defendant and the primary subject of the criminal conviction record.				
the designated representative of the Defendant, by power of attorney or notarized				
authorization.				
the parent of the Defendant, if Defendant is under legal disability.				
the appointed legal representative of the Defendant, if Defendant is under legal				
disability.				
2. I Information about the Petitioner: Date of Birth:				
If different from the "filed by" section above, also give the Petitioner's:				
·				
Mailing Address:				
City: State: Zip Code:				
Main Phone #: Work Phone #:				
3. The criminal conviction records are in the custody of the following agencies:				
The criminal conviction records are in the custody of the following agencies:				
Municipal Courts Case Number: Mailing Address:				
3E				
☐ Sheriff's Department				
Mailing Address:				
☐ District Attorney				
· · · · · · · · · · · · · · · · · · ·				
Mailing Address:				
☐ City Attorney				

	Law Enforcement (name) Mailing Address:	Case Number:		
X	Colorado Bureau of Investigation (CBI) (ATTN Identification-Seals, 690 Kipling St. ST			
	Other:Mailing Address:			
Information about the criminal conviction to seal is as follows:				
Ide	dentify offense(s) convicted of in the case requesting to seal:			
	Municipal Violation(s) of			
Dat	te Sentenced:			
Pro	obation/Parole Supervision Termination D	ate:		
Wa	Vas this case appealed?  Ves  No If yes, please provide the following information:			
	Appeal Case Number:			
		<del></del>		
	••			
	Appellate Court:			
hist	Appellate Court:  Result:  current verified copy of the Defendant's tory record check was conducted no more	Date: criminal history record is attached, and the criminal than 20 days prior to the filing of this Petition.  Yes copy of the criminal history record must be filed with		
hist the	Appellate Court:  Result:  current verified copy of the Defendant's tory record check was conducted no more No (If it is not attached to this Petition, a Court no later than 10 days after the filing	Date: criminal history record is attached, and the criminal than 20 days prior to the filing of this Petition.  Yes copy of the criminal history record must be filed with		

- **9.** The Petition is for a conviction eligible for sealing under § 24-72-708 C.R.S
- **10.** The case I am requesting be sealed contains at least one charge that is not a class 1 misdemeanor traffic offense, class 2 misdemeanor traffic offense, class A traffic infraction, or class B traffic infraction.
- 11. I understand sealing is not available for records pertaining to a deferred judgement and sentence concerning the holder of a commercial driver's license or the operator of a commercial motor vehicle pursuant to § 42-2-402, C.R.S., or an offense for which the factual basis involved unlawful sexual behavior pursuant to § 16-22-102(9), C.R.S.
- 12. If, subsequent to the conviction in the case I am requesting be sealed, I have been convicted of a single offense that was not a felony and did not involve domestic violence as defined in § 18-6-

800.3(1), unlawful sexual behavior as defined in § 16-22-102(9), or child abuse as defined in § 18-6-401, I understand sealing is not available for records pertaining to a municipal assault or battery offense, as defined in § 18-6-800.3(1) or any other municipal violation in which the underlying factual basis involves domestic violence as defined in § 18-6-800.3(1).

**13.** Petitioner requests the Court to enter an order sealing the municipal conviction record pertaining to the Defendant, pursuant to § 24-72-703 and § 24-72-708 C.R.S., and to seal this action.

Certificate of Service	
I certify that on (enter date) prosecuting attorney by: (select at least one)	, I gave a copy of this document to the
☐ Efiling <i>(where available)</i> ☐ Email or Fax to:	
Hand Delivery, to: (name, place)  1) 2)	Regular Mail, addressed to: (name, full address)
Signature	
Petitioner (Defendant) Signature	Dated
Lawyer Signature (if any) Dated	