

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

**Check your email.** You will receive information and documents at this email address.

\_\_\_\_\_  
Email

I am the  Defendant  
 Parent or Guardian of the Defendant

In the  District  Juvenile  Justice Court of Utah  
\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

\_\_\_\_\_  
Plaintiff

v.

\_\_\_\_\_  
Defendant

**Statement of No Unlawful Alcohol Consumption**

\_\_\_\_\_  
Case Number

\_\_\_\_\_  
Judge

Being first sworn and under oath or affirmation, I say as follows: (Choose one)

I am the defendant in this case, and I am 18 years of age or older. I have not unlawfully consumed alcohol during the period of license suspension or denial.

I am the parent or legal guardian of the defendant, who is under 18 years of age. To the best of my knowledge the defendant has not unlawfully consumed alcohol during the period of license suspension or denial.

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at \_\_\_\_\_ (city, and state or country).

\_\_\_\_\_  
Date Signature ► \_\_\_\_\_

Printed Name \_\_\_\_\_

### Certificate of Service

I certify that I filed with the court and am serving a copy of this Statement of No Unlawful Alcohol Consumption on the following people.

Person's Name	Service Method	Service Address	Service Date
(Prosecuting Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed/MyCase <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed/MyCase <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Sign here ►

Date \_\_\_\_\_

Typed or Printed Name \_\_\_\_\_