

**ISSAQUAH SCHOOL DISTRICT 411  
School Bus Stop Signal Safety Program  
AFFIDAVIT OF NON-LIABILITY**

**Notice of Infraction #:** \_\_\_\_\_ **Notice #:** \_\_\_\_\_

**Vehicle License Plate #:** \_\_\_\_\_ **State:** \_\_\_\_\_

In the space above, you must accurately write the Infraction # and Notice # that appears in the box in the upper right of the front of the Notice of Infraction. Also please provide the license plate and state for the vehicle involved in the violation. Please write clearly and record the information accurately. If the Infraction # or Notice # is unclear or incorrect, we may not be able to match your Affidavit to the Notice of Infraction.

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**I received the Notice of Infraction listed above. At the time of the occurrence indicated in the Notice of Infraction, the vehicle described in the Notice was:**

- Sold (include a copy of either a bill of sale OR a copy from your insurance company showing when vehicle was taken off of policy and provide the new owner's name and address below)**
- Stolen (provide vehicle or license plate; include a copy of the police report)**
- Not in my care, custody or control (provide the driver's name and address below)**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
Street City State Zip

**Other:**

Your Affidavit will be reviewed by the King County District Court. You will be notified of the outcome by mail. **I declare under penalty of perjury that the information provided in this Affidavit is true.**

\_\_\_\_\_  
**Your Signature** Date

\_\_\_\_\_  
Print your name Your telephone number Your email address

\_\_\_\_\_  
Your mailing address Your city Your state Your zip code

**Mail to:  
King County District Court  
Issaquah Courthouse  
5415 220th Avenue SE  
Issaquah, WA 98029-6839**