

Person Filing: _____

Address (if not protected): _____

City, State, Zip Code: _____

Telephone: _____

Email Address: _____

Lawyer's Bar Number: _____

For Clerk's Use Only

Representing ☐ Self, without a Lawyer or ☐ Attorney for ☐ State OR ☐ Defendant

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

STATE OF ARIZONA, Plaintiff
-VS-

Case Number: _____

APPLICATION TO SET ASIDE CONVICTION A.R.S. § 13-905

DEFENDANT (First, MI, Last)

Date of Birth: _____

Applicant is: ☐ Defendant
☐ Attorney for Defendant
☐ Probation Officer

Note: Includes application to restore firearm rights pursuant to A.R.S. § 13-905(J)

☐ **REQUEST FOR RECONSIDERATION**
(for applications previously denied)

SECTION I. CONVICTION(S)

A Judgment of Guilt was entered in the Superior Court of Arizona in Maricopa County against me, the defendant, on the _____ day of _____, 20_____, on the conviction of:

1. Count I: _____

2. Count II: _____

3. Count III: _____

4. Count IV: _____

☐ Additional counts continue on a separate page.

SECTION II. SENTENCE COMPLIANCE

1. ☐ This is my first felony conviction in this or any other State.

OR

- ☐ I have also been convicted of a felony in the following Court(s):

Court Name: _____ in case number _____

Court Name: _____ in case number _____

(Attach a separate page for additional cases and convictions)

2. I was sentenced to: ☐ a term of probation ☐ the Department of Corrections
3. ☐ I completed the conditions of probation. The Probation Department's order discharging me from probation is attached to this application, if available.
4. ☐ I have complied with all the required terms of the sentence (including all probation, employment, classes, community service, victim restitution or other court ordered monetary obligations, drug/alcohol testing, or other requirements.)
5. ☐ I have not complied with all terms of my sentence. Explain: _____
- _____
- _____
- _____
6. ☐ I received a *Certificate of Absolute Discharge from Imprisonment* from the Arizona Department of Corrections AND have attached a copy of that Certificate to this application, if available.

7. Have you paid victim restitution in full? ☐ Yes ☐ No

If not, a set aside of judgment of conviction will be denied without a showing of extraordinary circumstances. If you believe you have extraordinary circumstances, explain below. (*Attach documentation you think is relevant for the court's consideration.*)

8. Have you paid all other court-ordered monetary obligations in this case (criminal fines and fees) in full?

☐ Yes ☐ No If not, please explain:

In some circumstances, you may be eligible to apply to the court to mitigate the amount owed or convert monies owed to community restitution.

SECTION III. PRIOR SET ASIDE(S)

1. Have you previously applied to set aside any conviction? ☐ Yes ☐ No

If so, what was the date of your last application? _____

2. Have you previously been granted a set aside? ☐ Yes ☐ No

3. Have you previously been denied a set aside? ☐ Yes ☐ No

SECTION IV. PENDING CASES AND ACTIVE WARRANTS

1. Are there any open criminal cases against you? ☐ Yes ☐ No
2. Do you have an active warrant? ☐ Yes ☐ No

If yes to either question above, please explain:

SECTION V. OTHER INFORMATION FOR THE COURT

1. Is there anything you would like the court to take into consideration?

2. ☐ Attach any other information you would like the court to consider. List attached documents:

3. The court may decide on this application without a hearing unless a hearing is requested by you, the prosecutor's office, or the victim. (*Check the box below if you are requesting a hearing.*)

Hearing requested? ☐ Yes ☐ No

Case Number: _____

I understand that this application may be denied if information in this application is found to be inaccurate.

I understand that even if I am granted the right to possess a firearm under Arizona law, it may not give me the right to possess a firearm under federal law.

I declare under penalty of perjury that the information provided in this application and any attachments is true and correct.

Applicant's Name Printed

Applicant's Signature

Address

AUTHORIZATION TO PROCEED ON BEHALF OF DEFENDANT

I authorize _____ ☐ Attorney, or ☐ Probation Officer to petition the Superior Court of Arizona in Maricopa County, to take the above-indicated action.

Date

Defendant's Signature