Hon. Christopher T. Portis
Chief Judge

Rashida A. Davis
Court Administrator

Municipal Court of Atlanta
150 Garnett Street, SW
Atlanta, GA 30303

REQUEST FOR RESET

Last Name: _____ First Name: _____

Citation/Case Number: _____ Court Date: _____

Date of Birth (MM/DD/YYYY): _____ Driver's License Number: _____

Defendant requests that this court reschedule the hearing calendared for the above court date. Defendant is

unable to appear for the following reason:

_____

_____

_____

_____

For these reasons, Defendant requests the Court reschedule the hearing.

_____   _____
Signature   Date

_____
Printed Name

**NOTE: If approved, the Court will mail a reset notice with your new court date to your address on
file. You must appear at your scheduled court date if you do not receive a new reset date**.

OFFICIAL MUNICIPAL COURT OF ATLANTA USE

Accepting Clerk: _____ File Date: _____

Request Number: ☐ 1st ☐ 2nd ☐3rd ☐ other: _____