

Person Filing: \_\_\_\_\_  
 Address (if not protected): \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Representing  Self or  Lawyer for \_\_\_\_\_  
 Lawyer's Bar Number: \_\_\_\_\_

For Clerk's Use Only

**YUMA MUNICIPAL COURT OF ARIZONA  
 IN YUMA COUNTY**

STATE OF ARIZONA  -vs-  _____  Defendant (FIRST, MI, LAST)  Date of Birth: _____  Applicant is: <input type="checkbox"/> Defendant <input type="checkbox"/> Attorney for Defendant <input type="checkbox"/> Probation Officer	Case Number: _____  <p style="text-align: center;"><b>APPLICATION TO SET ASIDE          CONVICTION</b></p> <p style="text-align: center;">(A.R.S. § 13-905)</p> <p><b>Note:</b> Your application may entitle you to          restoration of the right to possess and carry a          firearm pursuant to A.R.S. § 13-905(J)</p>
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**SECTION I. CONVICTION(S)**

A Judgment of Guilt was entered in the \_\_\_\_\_ Court against the defendant  
 on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, 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.  I have complied with all required terms of the **sentence** (including all probation, employment, classes, community restitution, victim restitution or other monetary obligations, drug/alcohol testing, or other requirements).  **Yes**  **No**. If no, please explain:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2.  I received a certificate of absolute discharge from the Arizona Department of Corrections.  
 **Yes**  **No**.

3. Victim restitution  **has**  **has not** been paid in full or  **was not ordered**.

If victim restitution has not been paid in full, please explain:

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4. All other court-ordered monetary obligations  **have**  **have not** been paid in full or  **were not ordered**.

If all other monetary obligations have not been paid in full, please explain:

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In some circumstances, you may be eligible to apply to the court to modify 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**

1. Are there any open criminal cases against you?  **Yes**  **No**. If yes, please explain:

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**SECTION V. OTHER INFORMATION FOR THE COURT**

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

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2.  Attached is other pertinent documentation. List attached documents:

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3. The defendant, prosecutor, or the victim may request a hearing, but the court is not required to set a hearing. Do you request a hearing?  **Yes**  **No**.

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

**I understand that even if I am granted the right to possess and carry a firearm pursuant to this application I may still be prohibited from possessing and carrying a firearm under other state or federal laws.**

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

**I declare under penalty of perjury that, to the best of my knowledge, the information provided in this application and any attachments is true and correct.**

\_\_\_\_\_  
Print Defendant's Name

\_\_\_\_\_  
Defendant's Signature

\_\_\_\_\_  
Address

**OR**

**AUTHORIZATION TO PROCEED ON BEHALF OF DEFENDANT**

I authorize \_\_\_\_\_ [ ] Attorney, or [ ] Probation Officer to  
petition the \_\_\_\_\_ Court in \_\_\_\_\_ County, to take the above-indicated action.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant's Signature

**To the best of my knowledge, the information provided in this application is true and correct.**

\_\_\_\_\_  
Print Attorney/Probation Officer Name

\_\_\_\_\_  
Attorney/Probation Officer Signature

\_\_\_\_\_  
Attorney/Probation Officer Address