

**IN THE MAGISTRATE COURT OF WALTON COUNTY, STATE OF GEORGIA
APPLICATION FOR PRE – WARRANT HEARING**

Application fee: \$20.00

INFORMATION ABOUT APPLICANT

Applicant Name _____
Address _____
City, State, Zip Code _____
Place of Employment (job title) _____

(Area Code) Home Phone Number _____
(Area Code) Work Phone Number (ext#) _____
(Area Code) Cell Phone Number (if applicable) _____

PLEASE READ CAREFULLY:

1. There **MUST** be a crime alleged pursuant to a violation of the Laws of the State of Georgia before a hearing will be scheduled by the Magistrate Court.
2. Application for a **MISDEMEANOR** warrant **MUST** be accompanied by a police report obtained by you before a hearing will be scheduled by the Magistrate Court.
3. Application for a **FELONY** warrant **MUST** be investigated by the appropriate Law Enforcement jurisdiction before submission of this application to the Magistrate Court.
4. A **FULL ADDRESS** **MUST** be provided on the person you are making a complaint against before submission of this application to the Magistrate Court.
5. All information **MUST** be detailed and true and correct to the best of your knowledge.

I AM MAKING A COMPLAINT AGAINST THIS PERSON:

Name _____
Address _____
City, State, Zip Code _____
Place of Employment (job title) _____
Work address (street, city, state, zip code) _____

(Area Code) Home Phone Number _____
(Area Code) Work Phone Number (ext#) _____
(Area Code) Cell Phone Number (if applicable) _____
Other address _____
This person lives in _____ County.

This person drives a: _____
(Make, Model, Year, Color, Tag#, any identifiable marks, dents, logos, etc)

RACE: _____ SEX: _____ AGE: _____ HEIGHT: _____ WEIGHT: _____ DATE OF BIRTH: _____ SS#: _____

HAIR COLOR: _____ BEARD: MOUSTACHE: GOATEE: NO FACIAL HAIR: SCARS/MARKS/TATTOOS: _____

How do you know this person?: _____

DESCRIBE IN DETAIL WHAT THIS PERSON DID: _____

(attach additional information if needed)

Date/Time of Incident: _____/_____/20____: _____ AM or PM Location of Incident: _____

Have you ever applied for a warrant against this person before? YES NO
Have you ever applied for a warrant against anyone else before? YES NO

Has this person ever taken out a warrant against your before? YES NO
Have you ever asked for a warrant to be dismissed before? YES NO

Name _____
Address _____
Contact numbers (home, work, cell phone numbers) _____

Name _____
Address _____
Contact numbers (home, work, cell phone numbers) _____

I DO SOLEMNLY SWEAR/AFFIRM THAT ALL OF THE ABOVE CONTAINED INFORMATION IN THIS APPLICATION FOR A CRIMINAL WARRANT AGAINST THE NAMED PERSON IS TRUE AND CORRECT.

Affiant signature

Date

Sworn to and subscribed before me this _____ day of _____, 20____.

Notary Public/Attesting Official

Visible injuries: _____

Offense: _____ OCGA: _____
Offense: _____ OCGA: _____
Offense: _____ OCGA: _____