



DISTRICT COURT OF MARYLAND FOR City / County

Located at Case No
Court Address

STATE OF MARYLAND

vs. Defendant D.O.B.

ID.....AR

Document

FORM 4-503.3. APPLICATION FOR EXPUNGEMENT OF POLICE RECORD

1. On or about Date, I was arrested, detained, or confined by an officer of the Law Enforcement Agency, at....., Maryland, as a result of the following incident.....

2. On or about..... Date, I was released without having been charged with a crime.

3. On or about..... Date, I requested the law enforcement agency to expunge my police record pertaining to the incident.

4. The above named law enforcement agency (check appropriate box);

issued the attached Notice of Denial of Request for Expungement.

failed to notify me of any action taken within 60 days after receipt of my Notice and Request for Expungement.

WHEREFORE, I request the Court to enter an Order of Expungement of all police records pertaining to my arrest, detention, or confinement, and all court records of these proceedings.

I solemnly affirm under the penalties of perjury that the contents of this application are true to the best of my knowledge, information, and belief and that the arrest to which this application relates was not made for any nonincarcerable violation of the Transportation Article of the State of Maryland.

.....
Signature of Attorney Date
.....
Name - Printed
.....
Address
.....
.....
Telephone No.

.....
Signature of Defendant Date
.....
Name - Printed
.....
Address
.....
.....
Telephone No.

FORM 4-503.4. NOTICE OF HEARING

TO THE LAW ENFORCEMENT AGENCY SERVED HERewith:

A hearing on the foregoing Application for Expungement of Records has been set for..... Date
at.....M. in the District Court for..... City/County
at....., Maryland, at which time an Order for Expungement of Records may be entered.

If you wish to oppose the application, within 30 days after the service of this Notice of Hearing you must file and serve upon the applicant or the applicant's attorney of record an answer stating in detail your specific grounds for objection.

Issued this day of Month, Year

.....
Clerk

To request a foreign language interpreter or a reasonable accommodation under the American with Disabilities Act, please contact the court immediately.