

BROWARD COUNTY 17th JUDICIAL CIRCUIT COURT
Pretrial Intervention Program
DEFERRED PROSECUTION AGREEMENT

It being alleged in Information # _____ that you _____ committed an
(Court Case#) (Defendant Name)
Offense against the State of Florida on or about the ____ day of _____ 20____, to wit: (List Crime(s))

Having been advised of your Constitutional Rights and it further appearing after an investigation of the offense and your background that the interest of the State of Florida, and your interest, will best be served by entering into this Agreement.

Therefore, Harold F. Pryor, State Attorney, in and for the Seventeenth Judicial Circuit, Broward County, Florida, agrees that prosecution in this matter for said offense will be deferred for a period of one (1) year from this date, provided you abide by the following conditions:

1. You will live and remain at liberty without violating any law (Federal, State or Local). A conviction in a Court of Law is not necessary as any criminal arrest could constitute a violation of your Pretrial Intervention Agreement.
2. You will pay to the State of Florida, the amount of \$ **50.00** per month toward the cost of your supervision, plus a four percent administrative processing fee in accordance with Florida Statutes 945.31 and 948.09, unless any such payments are specifically waived, in compliance with Florida Statutes.
3. You shall pay costs of prosecution in the amount of \$**250.00** within the first month of acceptance to the PTI Program unless otherwise directed by your officer.
4. You will attend school or work regularly at a lawful occupation. You agree that within thirty (30) days of entering the Program, you will provide a payroll stub to verify employment. Notification to your employer will not formally be made unless the case involves theft from an employer or employer notification is ordered as a special condition by the prosecutor. You are not required to work during the period of time you are enrolled as a full-time student.
5. You will not change your residence or employment or leave the State of Florida without first procuring the consent of your Pretrial Intervention (PTI) Officer.
6. You will immediately inform your Pretrial Intervention Supervisor if you get arrested, or have any contact with Law Enforcement.
7. You will not travel outside of the U.S.A. while in the PTI Program.
8. You shall associate only with law abiding persons.
9. You will make yourself available for the services of the Pretrial Intervention Program by reporting in person to your PTI Officer as directed.
10. You will not use any intoxicants to excess, nor will you use any controlled substances. Any positive drug test will result in your automatic dismissal from the program. You will submit to urinalysis, breathalyzer or blood tests at any time requested by your officer or the professional staff of any treatment center where you are receiving treatment, to determine possible use of alcohol, drugs or controlled substances. You shall be required to pay for such tests.

11. You shall pay restitution in the amount of \$ _____, plus a four (4) percent surcharge, jointly and severally if applicable, per Florida Statute 945.31, within the first eight (8) months of PTI in equal monthly installments as directed by your officer.
12. You will truthfully answer all inquiries by your officer, agree that your officer may visit your home, employment, school, or elsewhere, without your prior approval, and will comply with all instructions your officer may give you.
13. You will attend any alcohol, drug, psychological or other rehabilitative program directed by your Pretrial Intervention Officer and if no such program is deemed necessary, you will enroll in and attend a self-improvement class or program approved by your Pretrial Intervention Officer. You will be responsible for any fees or costs associated with treatment.
14. **You shall do 40 hours of community service.**
15. You will neither possess, carry nor own any weapon or firearm.
16. You will testify truthfully at a deposition or trial of any co-defendant(s) if so required by the State Attorney's Office.
17. You will have no contact with the victim(s) or return to the victim's business or home.
18. You will pay the Broward County Public Defender's Application Fee of fifty (50) dollars, if you are represented by the Public Defender's Office.
19. You are not required to enter a plea of guilty to the charges to participate in PTI if you are supervised within the state of Florida by the Florida Department of Corrections and if you have applied within 45 days of arraignment. **However, if you are not a bona fide resident of the State of Florida or if you are permitted by PTI to reside outside Florida during the period of supervision or if you have applied outside of 45 days since arraignment or if the State deems it more appropriate for any other reason, you must waive your right to trial and plead guilty to the charges and have your sentencing deferred for a period of one year.** Your supervision will be subject to the Interstate Compact for Adult Offender Supervision. Upon successful completion of the Program, as determined by the State Attorney's Office, the State will agree to allow you to withdraw your previously entered plea of guilty and the case will be dismissed. Should you fail to successfully complete the Program, as determined by the State Attorney's Office, you agree that you will not be allowed to withdraw your plea of guilty and you will be sentenced by the court.

20. Special Conditions: _____

You must endeavor to complete all program requirements within 90 days of your anticipated termination date. The State Attorney may, during the period of Deferred Prosecution revoke or modify the conditions of your Deferred Prosecution by:

1. Extending, or reducing, the period of Deferred Prosecution.
2. Prosecuting you for this offense if you violate any terms of this agreement.
3. Voiding this agreement should it be determined that you have a prior record of adult criminal felony convictions.

If you comply with these conditions during the period of Deferred Prosecution, the offense(s) for which you are placed in the program will be dismissed.

IN RE: STATE OF FLORIDA v. _____
CASE # _____

Signing this Deferred Prosecution Agreement withdraws and/or waives your right to a speedy trial under the Constitution and Laws of Florida and the United States of America in the cause of which prosecution is being deferred. Attached hereto and incorporated by reference is the Waiver of Rights document that you executed and notarized. The signatures below attest to this Agreement between the parties on this ____ day of _____, 20____.

Harold F. Pryor
State Attorney

Signed By: _____
Assistant State Attorney Date _____

Print ASA Name: _____

I hereby state that the above has been read and explained to me. I understand the conditions of my Deferred Prosecution and agree that I will comply with same.

Signed By: _____
Date _____

Print Defendant Name: _____

Signed By: _____
Date _____

Print Defense Attorney Name: _____

Witnessed by: _____
Date _____

Print Witness Name: _____