Person Filing: _____

Address (if not protected): _____

City, State, Zip Code: _____

Telephone: _____

Email Address: _____

Lawyer's Bar Number: _____

For Clerk's Use Only

Representing ☐ Self, without a Lawyer OR ☐ Attorney for ☐ State OR ☐ Defendant

SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY

STATE OF ARIZONA,
Plaintiff
v.

_____
Defendant (First, MI, Last)

Case Number: _____

APPLICATION TO DESIGNATE A FELONY CONVICTION AS A CLASS 1 MISDEMEANOR CONVICTION (A.R.S. § 13-604.01)

☐ Subsequent Application – Relief Previously Denied
(Select if you previously filed an application for the conviction, relief was denied, and you are submitting your request again)

Applicant is:
☐ Defendant
☐ Attorney for Defendant

Pursuant to A.R.S. § 13-604.01 and Supreme Court Administrative Order No. 2026-136, Defendant hereby applies to the court to designate Defendant's class 4, 5, or 6 felony conviction as a class 1 misdemeanor conviction as indicated in this application. Answers to the questions in this application relate to the felony conviction Defendant is requesting that the court designate as a class 1 misdemeanor.

SECTION I. DEFENDANT INFORMATION

Defendant's Name: _____

Defendant's Address: _____

Date of Birth: _____

Email: _____

Name at the time of conviction, if not the same as above:

_____

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Case No._____

SECTION II. ELEGIBILITY AND SENTENCE COMPLETION INFORMATION

1. Did the felony involve a dangerous offense (A.R.S. §§ 13-105 and 13-704)?
   a. ☐ Yes b. ☐ No

2. Is your felony conviction for a class 1, 2, or 3 felony?
   a. ☐ Yes b. ☐ No

3. Is your felony conviction for a violation of A.R.S. §§ 13-2910, 13-3102, or 13-3821?
   a. ☐ Yes b. ☐ No

4. Did your offense involve a victim?
   a. ☐ Yes b. ☐ No

5. Prior to this conviction, were you convicted of any other felony in Arizona or any other state, including any conviction under federal law?
   a. ☐ Yes b. ☐ No

STOP: You cannot file this application if you answered "Yes" to questions 1, 2, 3, 4, or 5.

6. Have you paid all monetary obligations in full, including fines, fees, other court-ordered financial obligations, and restitution if applicable?
   a. ☐ Yes b. ☐ No c. ☐ N/A. There were no monetary terms ordered.

7. Have you completed all other terms and conditions of the sentence, such as incarceration, probation, employment, classes, drug/alcohol testing, or other requirements?
   a. ☐ Yes b. ☐ No c. ☐ N/A. There were no other terms ordered.

8. If you were ordered to a term of probation, have you been discharged from probation?
   a. ☐ Yes. The probation department's order discharging me from probation is attached to this application, if available.
   b. ☐ No
   c. ☐ N/A. I was not ordered to a term of probation.

9. If you were sentenced to a term of imprisonment, have you received an absolute discharge from imprisonment from the Arizona Department of Corrections, Rehabilitation, and Reentry (ADCRR)?
   a. ☐ Yes. I received an absolute discharge from imprisonment from the ADCRR AND have attached a copy of the Certificate of Absolute Discharge from Imprisonment to this application, if available.
   b. ☐ No
   c. ☐ N/A. I was not sentenced to ADCRR.

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10. Have at least 5 years passed since you completed your sentence?

    a. ☐ Yes b. ☐ No

STOP: You cannot file this application if you answered "No" to questions 6, 7, 8, 9, or 10.

11. Since the date of the completion of your sentence, have you been convicted in Arizona or any other state, including a conviction under federal law, of a misdemeanor offense involving a victim or a felony offense?

    a. ☐ Yes b. ☐ No

    If yes, provide the following information:

Count	Classification	A.R.S./Other	Conviction Date	Offense Date

☐ Additional counts continue on a separate page.

Name of Court where you were convicted: _____

SECTION III. CONVICTION INFORMATION

1. A Judgment of Guilt was entered by this court against the defendant on _____ (date) for the following eligible offenses committed on _____ (date) on the conviction of:

   (List eligible convictions only. The court may grant or deny redesignation of any conviction listed)

Count	Classification	A.R.S. §	Description

☐ Additional counts continue on a separate page.

2. Name of prosecuting agency, if known: _____

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SECTION IV. OTHER INFORMATION FOR THE COURT

1. Have you previously applied to request that the court designate this felony conviction as a class 1 misdemeanor conviction?
   a. ☐ Yes. The date of my last application was: _____ (date)
   b. ☐ No

   If you answered "Yes," explain what has changed since the prior application that may now support granting relief:

2. The court may rule on your application without a hearing unless you or the prosecutor request one. Do you request a hearing?
   a. ☐ Yes
   b. ☐ No

3. Is there anything else you would like the court to consider regarding this application?

4. ☐ Attached is other pertinent documentation (non-originals). List attached documents:

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Case No. _____

This signature page belongs to the form titled "Application to designate a felony conviction as a class 1 misdemeanor conviction" and cannot be used with any other documents.

DECLARATIONS AND ACKNOWLEDGMENTS

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 the information I have provided in this application and any attachments is true and correct to the best of my knowledge.

_____ _____

Defendant's Signature Date

_____

Defendant's Printed Name

OR

AUTHORIZATION TO PROCEED ON BEHALF OF DEFENDANT

I authorize _____ ☐ Attorney to apply to the Superior Court in Maricopa County, to take the above-indicated action.

_____ _____

Defendant's Signature Date

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