

STATE OF VERMONT

SUPERIOR COURT
Unit

CRIMINAL DIVISION
Docket No.

In RE:

DOB:

STIPULATION TO EXPUNGE OR SEAL CRIMINAL HISTORY RECORD

We, the undersigned Defendant and State's Attorney, hereby agree that the offense(s) meet the requirements for expungement or sealing pursuant to 13 V.S.A. §7602 and that the Court may issue an Order to:

- ☐ Expunge
☐ Seal

the criminal history record for the offense(s) described below:

Description of Offense	Date of Offense	Incident Number	Docket Number (if any)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- ☐ I was cited or arrested by (name of arresting law enforcement agency or department)
_____, but a charge was never filed with the Court.

We further understand that the effect of this Order will be to expunge or seal any records of arrest, conviction or sentencing for this/these offense(s) and that the Defendant will hereafter be treated in all respects as if he or she had never been arrested, convicted or sentenced for the offense(s).

Defendant:

Date of Signature

Signature

Mailing Address

City, State, Zip

Phone

/_____
Email

State's Attorney:

Date of Signature

Signature

ORDER

Based upon the agreement of the Defendant and the State's Attorney and pursuant to 13 V.S.A. §7602, it is hereby ORDERED that criminal history record of the offense(s) described above be:

- ☐ Expunged
- ☐ Sealed

All records related to the arrest, conviction or sentencing for this/these offense(s) shall be expunged or sealed and that the Defendant will hereafter be treated in all respects as if he or she had never been arrested, convicted or sentenced for the offense(s).

Date of Signature

Signature of Superior Court Judge

Printed Name of Judge

cc: State's Attorney
Arresting Agency
Diversion
DMV, if applicable
VCIC
Defendant
Defender General
Attorney General