

Office of the Wabaunsee County Attorney

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WABAUNSEE COUNTY DIVERSION GUIDELINES

Effective January 21st, 2016

The following is a listing of “set/standard” offenses, diversion fees and terms of diversion approved by the County Attorney pertaining to adult criminal and non-infraction traffic cases only:

| Offense: | Length of Diversion | Diversion Fee | |
|------------------|---------------------|---------------|--------------------------------|
| DUI | 12 Months | \$500 | |
| MIP / TOC | 12 Months | \$500 | |
| Domestic Battery | 12 Months | \$400 | (Prices do not include cost of |
| MIP/MIC | 6 Months | \$400 | classes, treatment, etc.) |
| DWS/No Insurance | 6 Months | \$300 | |
| TOC only | 6 Months | \$300 | |

Other offenses will be considered for diversion depending on the circumstances. Offenses will have standard requirements. For instance MIP and DUI require an alcohol evaluation and possibly follow through treatment and a domestic battery conviction will require a domestic violence assessment with potential follow through treatment.

Generally, Application must be made within 30 days of first appearance or arraignment, whichever occurs first.

In cases with multiple counts, each count will carry an additional fee. Court costs and court appointed attorney fees will be in addition to the diversion fee.

50% of the total amount owed is due at the time of execution of the diversion contract which stays the case and starts the diversion time period. A show cause date, before the Court, will then be set after the halfway point of the diversion period. The remainder of the money obligation is due by the show cause date and failure to pay is a grounds for revocation of the diversion.

At the show cause hearing, the case will be reviewed for money owed, criminal history, and treatment completion or other requirement completion as applicable. If all requirements have been met at that time, no appearance is required and the diversion can run its course with continued conditions of compliance with the law.

If any condition is not met by the show cause date, appearance before the Court is required, although at the show cause date, only failure to pay the remaining monetary obligation is grounds for revocation. The show cause will serve as a status check on remaining obligations requirements. It is the applicant’s duty to verify compliance beforehand.

NOTIFICATION OF WABAUNSEE COUNTY DIVERSION PROGRAM

You are hereby notified that you will be considered for the Wabaunsee County Diversion program upon filing this application. Any false or misleading statements on an application for Diversion will bar the applicant from participation in the Diversion program.

- The prosecutor is prohibited from entering into a Diversion Agreement in lieu of being prosecuted for driving under the influence of alcohol and/or drugs if said Defendant has a prior conviction of such an offense or has participated in a Diversion Agreement for such an offense. There are also limitations on Domestic Battery diversions.
- If a Defendant is granted a Diversion and successfully completes all requirements of the Diversion Agreement entered into with the Wabaunsee County, the case against the Defendant will be dismissed with prejudice.

In order to be considered for diversion you must complete this application and return it to our office at PO Box 278, Alma KS 66401, within 30 days of the Arraignment or First Appearance, whichever occurs first.

APPLICATION FOR DIVERSION

Unless notified, you must still attend your scheduled court dates.

Name: _____ Date of Birth: _____
 Home Telephone Number: _____ Cell Phone Number: _____
 Permanent Address: _____
 Street City State Zip Code
 Social Security Number: _____
 Drivers License State & Number: _____

Name, complete address and phone number of someone who will ALWAYS know where you are: _____

Previous Arrest Record and Criminal Record: If you do not have any prior offenses, check this box:

Offense: _____ When: _____ Where: _____ Result: _____
 Offense: _____ When: _____ Where: _____ Result: _____

Explanation of why you are making this application for Diversion:

I agree to and authorize release of police reports and any information available concerning me to an authorized counselor or therapist. I have read the foregoing application. All the information is true and correct. I understand that if any of the foregoing information is not true and correct, this may be a basis for denial of Diversion or Revocation of a Diversion Agreement.

 Defendant

Subscribed and sworn to be before me this _____ day of _____, _____.
 My appointment expires:

 Notary Public