

HAYWOOD County

202 CR 702457

In The General Court Of Justice
 District Superior Court Division

WAIVER OF COUNSEL

G.S. 7A-457; 15A-124

STATE VERSUS
 Name Of Defendant
Nicole Kott
 Additional File No. (s) And/or Offense (s)

ACKNOWLEDGMENT OF RIGHTS AND WAIVER

As the undersigned party in this action, I freely and voluntarily declare that I have been fully informed of the charges against me, the nature of and the statutory punishment for each such charge, and the nature of the proceedings against me; that I have been advised of my right to have counsel assigned to assist me and my right to have the assistance of counsel in defending against these charges or in handling these proceedings, and that I fully understand and appreciate the consequences of my decision to waive the right to assigned counsel and the right to assistance of counsel.

I freely, voluntarily and knowingly declare that; (check only one)

- 1. I waive my right to assigned counsel and that I, hereby, expressly waive that right.
- 2. I waive my right to all assistance of counsel which includes my right to assigned counsel and my right to the assistance of counsel. In all respects, I desire to appear in my own behalf, which I understand I have the right to do.

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME Date 11/03/22
 Judge Heather S. Vance Signature Of Plaintiff
 Judge Clerk Of Superior Court Asst. CSC Deputy CSC Magistrate

CERTIFICATE OF JUDICIAL OFFICIAL

I certify that the above named defendant has been fully informed of the charges against him/her, the nature of and the statutory punishment for each charge, and the nature of the proceeding against the defendant and his/her right to have counsel assigned by the court and his/her right to have the assistance of counsel to represent him/her in this action; that the defendant comprehends the nature of the charges and proceedings and the range of punishments; that he/she understands and appreciates the consequences of his/her decision and that the defendant has voluntarily, knowingly and intelligently elected to open court to be tried in this action.

(check only one)

- 1. without the assignment of counsel.
- 2. without the assistance of counsel, which includes the right to assigned counsel and the right to assistance of counsel.

NOTE: For a waiver of assigned counsel only, both blocks numbered "1" must be checked. For a waiver of all assistance of counsel, both blocks numbered "2" must be checked.

Date 11/03/22 Name Of Judicial Official (type or print) Hon. Monica Leslie Signature Of Judicial Official

NOTE: A magistrate may accept waivers of counsel if designated to do so by the Chief District Court Judge. See G.S. 7A-146(1) and G.S. 7A-292(15).

HAYWOOD County

In The General Court Of Justice
 District Court Division

STATE VERSUS		DEFENDANT'S PLEA OF GUILTY OR NO CONTEST IN DISTRICT COURT			
Name Of Defendant					
Plea (GU=Guilty NC=No Contest GA=Alford plea)	Offense(s)	G.S. No.	Class	Maximum Punishment	

TOTAL MAXIMUM PUNISHMENT
 MANDATORY MINIMUM FINES & SENTENCES (if any)
 Terms Of Plea Agreement (if any)

DEFENDANT'S STATEMENT WITH PLEA OF (GUILTY) (NO CONTEST)

I plead guilty pursuant to Alford no contest to the charge(s) listed above. I understand that by entering this plea I am giving up the following constitutional rights, among others: (1) the right to plead not guilty and to be tried in district court by a judge, and to confront and to cross-examine the witnesses against me; and (2) the right to remain silent and not to be compelled to incriminate myself. I understand that I have the right to appeal to superior court and to be tried by a jury.

I am not now under the influence of any impairing substance. I understand the nature and elements of the charge(s) against me. I understand the maximum sentence(s) for the charge(s) against me and the minimum sentence(s), if applicable. I understand if I am not a citizen of the United States of America, my plea(s) of guilty or no contest may result in my deportation from this country, my exclusion from admission to this country, or the denial of my naturalization under federal law. Other than my plea agreement between the State and me, no one has made any promises or threats against me in any way to cause me to enter this plea. I enter this plea of my own free will, fully understanding what I am doing.

Date 11/03/22 Signature Of Defendant Witnessed By (if not represented)

CERTIFICATION BY LAWYER (if any) FOR DEFENDANT

I certify that I have explained to the defendant and the defendant has acknowledged to me that the defendant understands the constitutional rights that the defendant waives by entering the plea shown above, the nature and elements of the charge(s) shown above, and the maximum sentence(s) and any mandatory minimum sentence(s) that may be imposed for the charge(s) shown above. I certify that the defendant signed this document in my presence and has acknowledged to me that: (1) the defendant is not now under the influence of any impairing substance; (2) other than any plea agreement between the State and the defendant, the defendant has not been made any promise or threatened to enter this plea against the defendant's wishes; and (3) the defendant enters this plea of the defendant's own free will, fully understanding what the defendant is doing.

Date Signature Of Lawyer For Defendant

PLEA ADJUDICATION

Upon consideration of the statement of the defendant set out in this form, the certification set out in this form by the attorney (if any) for the defendant, evidence presented in court, and statements by the District Attorney, defendant, and the defendant's attorney (if any) in open court, the undersigned finds that there is a factual basis for the entry of the plea and that the plea is the informed choice of the defendant and is made freely, voluntarily, and understandingly. The defendant's plea is accepted by the Court and is ordered recorded.

Date 11/03/22 Name Of Presiding Judge (type or print) Hon. Monica Leslie Signature Of Presiding Judge

Membership Information

Mr. Joseph Carroll Bowman - Attorney

NOV 7 2022

Bar #:

28439

Name:

Mr. Joseph Carroll Bowman

Address:

40 Clearview Estates Dr

City:

Weaverville

State:

NC

Zip Code:

28787

Work Phone:

910-540-6627

Email:

josephcarrollbowman@gmail.com

Status:

Active

The lawyer is presently eligible to practice law in North Carolina.

Date Admitted:

08/27/2002

Status Date:

08/27/2002

Judicial District:

40 - Buncombe

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