**MOUNT VERNON MUNICIPAL COURT**

**REQUEST FOR LIMITED DRIVING PRIVILEGES**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LIST BELOW YOUR WORK SCHEDULE (DAYS OF THE WEEK, HOURS, OVERTIME):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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CIRCLE ANY ITEM BELOW FOR WHICH YOU ARE REQUESTING PRIVILEGES:

PROBATION APPOINTMENTS AA MEETINGS FREEDOM CENTER APPOINTMENTS

DRIVER INTERVENTION PROGRAM – LOCATION & DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROVIDE A DETAILED ROUTE OF TRAVEL FROM YOUR RESIDENCE TO THE DESTINATIONS YOU HAVE LISTED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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By signing this request for limited driving privileges, I affirm that I now have insurance or other financial responsibility coverage and that I will not operate any motor vehicle without FR coverage.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MOUNT VERNON MUNICIPAL COURT**

**REQUIREMENTS FOR FILING FOR LIMITED DRIVING PRIVILEGES**

**WHILE UNDER AN ADMINISTRATIVE LICENSE SUSPENSION OR OVI SUSPENSION**

WHEN FILING YOUR APPLICATION, THERE IS A NON-REFUNDABLE

FIFTY DOLLAR ($50.00) FILING FEE FOR COURT SUSPENSIONS,

AND A ONE HUNDRED DOLLAR ($100.00) FILING FEE FOR BMV SUSPENSIONS.

STEP 1 Complete this “Request for Limited Driving Privileges” form and attach proof of insurance and proof of employment (work schedule or pay stub).

STEP 2 Return the documents to the Clerk’s Office and pay the appropriate filing fee with cash, check or a money order. Your application will be reviewed and an order issued within five business days.

STEP 3 You may be required to obtain restricted plates and/or an ignition interlock device. You will be notified by the Clerk’s Office if either of these items is required. Each carries an additional expense.

STEP 4 If you are required to obtain plates or interlock, you must provide proof of the plate number (vehicle registration) and/or proof of the interlock installation to the Clerk’s Office.

STEP 5 The Clerk’s Office will notify you by phone when your driving privileges are ready. If the Clerk’s Office is unable to reach you by phone, the driving privileges will be mailed to the address on your request.

**YOU ARE NOT PERMITTED TO DRIVE UNTIL YOU HAVE**

**A CERTIFIED COPY OF YOUR “LIMITED DRIVING PRIVILEGES” FORM.**

**THIS FORM MUST BE CARRIED WITH YOU AT ALL TIMES.**