



# **BRATENAHL MAYOR'S COURT**

## **DRIVING PRIVILEGES CHECKLIST**

IN SUPPORT OF THE APPEAL AND/OR PETITION FOR LIMITED DRIVING PRIVILEGES, PLEASE SUPPLY THE FOLLOWING INFORMATION AND SUBMIT THE REQUIRED LIST OF DOCUMENTS. SUBMISSION OF THESE DOCUMENTS ELECTRONICALLY OR BY FILING THEM WITH THE CLERK OF COURTS WILL ENABLE A MAGISTRATE TO CONSIDER YOUR REQUEST FOR LIMITED DRIVING PRIVILEGES WITHOUT AN IN-PERSON HEARING AND PERSONAL APPEARANCE.

NAME: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

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

HOME PHONE NO.: \_\_\_\_\_ CELL PHONE NO.: \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_

**REASON(S) DRIVING PRIVILEGES ARE NEEDED:**

NAME, ADDRESS AND PHONE OF EMPLOYER: \_\_\_\_\_

YOUR WORK DAYS AND HOURS: \_\_\_\_\_

DRIVE TIMES BETWEEN HOME & WORK: \_\_\_\_\_

SECOND EMPLOYER NAME, ADDRESS AND PHONE: \_\_\_\_\_

YOUR WORK DAYS AND HOURS: \_\_\_\_\_

DRIVE TIMES BETWEEN HOME & WORK: \_\_\_\_\_

SCHOOL OR DAYCARE: \_\_\_\_\_

DAYS AND TIMES YOU NEED TO DRIVE: \_\_\_\_\_

COURT OBLIGATIONS: \_\_\_\_\_

DAYS AND TIMES YOU NEED TO DRIVE: \_\_\_\_\_

MEDICAL OR CAREGIVER: \_\_\_\_\_

DAYS AND TIMES YOU NEED TO DRIVE: \_\_\_\_\_

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**CHURCH OR RELIGIOUS SERVICES:** \_\_\_\_\_

**DAYS AND TIMES YOU NEED TO DRIVE:** \_\_\_\_\_

**OTHER REASONS** (e.g., grocery shopping, child activities or visitation, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **DOCUMENTS REQUIRED TO BE SUBMITTED:**

**1. PROOF OF FINANCIAL RESPONSIBILITY (LIABILITY INSURANCE)** (provide one of the following):

-Insurance card OR -SR22 Bond OR -Letter from Insurance agent with dates of coverage

**2. PROOF OF EMPLOYMENT** (provide one of the following):

-Letter from employer(s) verifying work schedule OR -Copy of recent pay stub from employment

OR -Copy of work schedule OR -Copy of work badge

**3. PROOF OF SCHOOL ATTENDANCE** (provide one of the following):

-Copy of driver's class schedule OR -Copy of child's school or daycare schedule

OR -Proof of attendance (report card, letter from school or daycare official)

**4. PROOF OF COURT OBLIGATIONS** (provide one of the following):

- Copy of court order OR -Copy of booklet showing attendance at AA meetings

OR -Copy of proof of attendance at classes as a condition of probation

**5. PROOF OF MEDICAL/CAREGIVER:**

-If driver must drive for medical treatment or act as a caregiver: (please provide one of the following):

- Doctor's order OR -Medical appointment card OR - Medical appointment letter

OR - Doctor's letter indicating elderly or disabled family member needs assistance.