| F | x Parte | | | | The clerk fills out below | | | |
|------------------|--|---------------------------------|---------------------|-------------------------------------|--|--|--|--|
| _ | arto | | | Cause No: | | | | |
| Print your name: | | | | ☐ District ☐ County ☐ Justice Court | | | | |
| _ | | | | | County, Texas | | | |
| Fi | irst Mic | ldle | Last | | | | | |
| | Pet | tition for O | ccupational | Driver's Li | icense | | | |
| Prii | nt your answers: | | | 2 | | | | |
| | • | | | | | | | |
| My | y name is: Firs | t | Midd | le | Last | | | |
| | m the Petitioner; I hanceupational Driver's Li | | al need to drive; a | and, I am askir | ng the court for an | | | |
| Ιa | sk the Court to consid | der the informa | ation I have prov | ided below. | | | | |
| CO | | | | | y of the Petition and the xas Department of Public | | | |
| | | I Petitio | ner's Persona | l Information | 1 | | | |
| | | i. i cuido | | | • | | | |
| 1. | Home address: | | | | | | | |
| | | Street addres | SS | | City — | | | |
| | | County | | Zip | , Texas | | | |
| 2. | Mailing address (if | different from al | bove): | | | | | |
| | - | , | , - | | | | | |
| 3. | Phone number: (|) | | | | | | |
| 4. | Email address: | | | | | | | |
| 5. | Date of birth: | | | | | | | |
| | Montl | h Day | Year | | | | | |
| 6. | The last four digits o | of my Social S | ecurity Number a | are | <u>.</u> | | | |
| 7. | Jurisdiction: (Check all that apply.) | | | | | | | |
| | ☐ Petitioner reside | s in this Coun | ty. | | | | | |
| | ☐ The incident for | which Petition | er's license was | suspended ha | ppened in this county. | | | |
| | ☐ This Court convi | cted Petitione spension or c | r of an offense u | nder the laws o | of this state that resulted in se under Trans Code | | | |

II. Driver's License Information

| 8. | Check all that apply and provide requested information: | | | | | | | |
|-----|---|--|-------------------|--|--|--|--|--|
| | ☐ I have never held a Texas Driver's License. | | | | | | | |
| | | My Texas Driver's License # is: Expiration date: | / / , | | | | | |
| | ☐ My Driver's License was issued by the state of | | | | | | | |
| | | My Driver's License number is Expiration date: | | | | | | |
| 9. | ls y | our license suspended because of a physical or mental disability? | Yes 🗌 No | | | | | |
| | ls y | Yes No | | | | | | |
| | | III. Notice to the State If Applicable | | | | | | |
| 10. | If any of the following are applicable, the Clerk of the Court shall serve the State with notice of this Petition as required by the Texas Transportation Code section 521.243(a). | | | | | | | |
| | (Check all that apply and fill in the blanks.) A. My license is suspended under Transportation Code section 521.342. (Conviction of various offenses of an individual under the age of 21) Yes No | | | | | | | |
| | | Date of conviction Court of conviction | | | | | | |
| | B. My license is suspended because I was convicted of: | | | | | | | |
| | | a. Criminally Negligent Homicide | Penal Code 19.05 | | | | | |
| | | b. Driving While Intoxicated | Penal Code 49.04 | | | | | |
| | | c. Driving While Intoxicated with Child Passenger | Penal Code 49.045 | | | | | |
| | | d. Flying While Intoxicated | Penal Code 49.05 | | | | | |
| | | e. Boating While Intoxicated | Penal Code 49.06 | | | | | |
| | | f. $\ \ \square$ Assembling or Operating an Amusement Ride While Intoxicated | Penal Code 49.065 | | | | | |
| | | g. Intoxication Assault | Penal Code 49.07 | | | | | |
| | | h. Intoxication Manslaughter | Penal Code 49.08 | | | | | |
| | on _ | in | | | | | | |
| | | Date of conviction Court of conviction County of convic | otion | | | | | |

IV. Suspensions and Charges

| 11. | Why is | s your Driver's License suspended? (Check all that apply and fill in the blanks): | | | | | | |
|-----|---|---|--|--|--|--|--|--|
| | A. I was arrested on/ _/ and the breath sample I provided registered above 0.08. | | | | | | | |
| | B. I was arrested on/, and I did not give a breath sample, as requested. Within the past ten (10) years from the date of the arrest that led to your current suspension, have you had a suspension for refusal to give a breath/blood sample or providing a sample with a blood alcohol content greater than .08 following an arrest for DWI? | | | | | | | |
| | | ∕ES □ NO | | | | | | |
| | | This court convicted me of on (date)/ under cause number | | | | | | |
| | D. A Texas court determined that I am a "habitual violator of traffic laws." | | | | | | | |
| | | ☐ A Texas court ordered me to go to a Driver Education Program, and my license, permit, and/or driving privilege is automatically suspended for 365 days. | | | | | | |
| | F. Other (If you did not check any of the above, why is your license suspended or invalid? specific.) | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 12. | I have | the following criminal charges pending: (You do not need to list traffic or Class C charges.) | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

V. Petitioner's Essential Need to Drive

| 13. Why do you need an Occupational Driver's License? (Check all that apply): I need an Occupational Driver's License to drive to and from my place Name of Employer #1: | | | | | | | | | |
|---|---|---------------------------------|--------------------------|-----------------------------|---------------|---------------|-----------------|----------|--|
| | | Employer's A | ddress: | | | | | | |
| | | Employer's Te | elephone: | | | | | | |
| | | Days and hours you work: | | | | | | | |
| | | Job title: | | | | | | | |
| | | Name of Emp | | | | | | | |
| | | Employer's A | ddress: | | | | | | |
| | | Employer's Te | elephone: | | | | , | | |
| | | Days and hours you work: | | | | | | | |
| | | Job title: | | | | | | | |
| | | I am self-emp | | | | | | | |
| | | My work addr | ess is: | | | | | | |
| | | I am in pursui | t of an occupa | ation or trade. | | | | | |
| I need to go to and/or transport family members to school. (Fill out be School #1 Name: Telephone | | | | | | | • | | |
| | | Address: | | | | | | | |
| | | School #2 Na | <u>me:</u> | | | Telepho | one: | | |
| | | Address: | | | | | | | |
| | | Other (explain, | | | | | | | |
| lf | f you are required to have an interlock device installed on each motor vehicle you own or operate because of a conviction under Penal Code 49.04 - 49.08 or because of a court order or bond requirement, you do not need to complete Numbers 14, 15, 16 below. | | | | | | | | |
| 14. | I dri | ve as part of my | / work or esse | ntial needs thr | oughout the f | following cou | nty or counties | . | |
| 15. | Driv | ing schedule y Monday | ou are reques Tuesday | ting: Wednesday | Thursday | Friday | Saturday | Sunday | |
| | From | ı: am/pm | am/pm | am/pm | am/pm | am/pm | am/pm | am/pr | |
| | To: | am/pm | am/pm | am/pm | am/pm | am/pm | am/pm | am/pr | |
| 16. | If yo | ou are asking the | e Court to allow | vyou to drive f | or more than | 4 hours per d | ay, explain wh | y below: | |

VI. Petitioner's Request to the Court

17. I ask the Court to order the Texas Department of Public Safety to issue me an Occupational Driver's License to drive for the purposes described above.

I further ask this Court to order the Texas Department of Public Safety to administer any and all tests required for the issuance of said Occupational License.

| Pe | titioner's name (print) | | | | | |
|------------------------|--|---|--|--|--|--|
| | | | | | | |
| Petitioner's signature | | | Date | | | |
| As | allowed by Section 132.001 of the claration in support of the Petition | Texas Civil Prac | tices and Remedi | | | |
| Му | / current legal name is: | | | | | |
| Fir | rst Midd | dle | Last | · | | |
| Му | / date of birth is:/ Month Da | y Year | | | | |
| Му | / address is: | | | | | |
| Sti | reet Address C | ity | State | Zip Code | Country | |
| | rmally signed in County this date:// Month Day | | | County, | State | |
| | | | ature of Persor | | | |
| swo as p thar | rrsuant to Texas Civil Practice and Remedie orn declaration, verification, certification, oa provided by law. This provision does not ap n a notary public. An unsworn declaration n claration as true under penalty of perjury an | th, or affidavit require ply to an oath of offic nade under this sectio | d by statute or require e or an oath required t on must be 1) in writing | d by a rule, order, or requ to be taken before a speci | irement adopted fied official other | |
| Se | ee below for a list of docum | ents to attac | h to this Petiti | on: | | |
| | A certified abstract (Type AR) of your driv | er's license record. | | | | |
| | An SR22 from your insurance company p | . | • | | | |
| | Proof of need to drive: Examples of proof that verifies your work schedule, a curren court why you need to drive unless your li – 49.08 and any vehicle you own or operation. | t pay stub, school reg cense is suspended : | jistration with schedule solely based on an inte | e, or your sworn affidavit e oxication offense under Pe | xplaining to the | |
| П | Proof of installation of a legally approved in | nterlock device if reau | ired due to a DWI con | viction or a court order. | | |