

VERMILION MUNICIPAL COURT

Name: _____

Case No. _____

Address _____

MOTION FOR DRIVING

DRIVING PRIVILEGES

Driving Privileges are requested for the following:

- Occupational - If you are requesting occupational privileges please provide the name, address and telephone number of each employer and the days and hours you work.

- School - Please provide the name, address and telephone number of each school and the days and the days and hours of classes

- Medical - Please provide the name, address and telephone number of each doctor or other medical provider and the hours of appointment.

- Other - If you are requesting other privileges please provide the details of your request.

Undersigned is not to the best of his knowledge under any other suspensions or convictions. The undersigned acknowledges that proof of insurance, proof of employment and a \$10.00 (\$15.00 with interlock) fee will be required prior to a letter to drive being issued by the court. Defendant also acknowledges he/she is in compliance with any payment arrangements with the court.

Defendant Signature

Date

VERMILION MUNICIPAL COURT

JOURNAL ENTRY

Defendant: _____

CASE NO. _____

Defendant is hereby granted driving privileges for the following with proof of employment and insurance.

- Work
- Medical
- Court Appointments
- Attorney Appointments
- AA/NA - Court Ordered treatment programs
- School _____
- Other _____
- _____

Defendant's request for driving privileges is denied.

W. Zack Dolyk, JUDGE