

FRANKLIN COUNTY MUNICIPAL COURT

LIMITED DRIVING PRIVILEGES INFORMATION SHEET

If you file a petition for limited driving privileges during the period of a **Financial Responsibility Non-Compliance Suspension imposed pursuant to R.C. 4509.101(A)**, you must be prepared to show proof at the time of the filing or at the hearing that:

1. Your driving privileges have not been suspended previously two or more times for a financial responsibility non-compliance suspension within five years of the violation of R.C. 4509.101(A).
2. You are not subject to suspension or revocation under any other law, except if you are subject to a court ordered suspension that arose out of a conviction by this court you may file the petition and ask the judge or magistrate to consider limited driving privileges for the period of that suspension.
3. You have satisfied all other conditions required for reinstatement of your driving privileges.
4. You have paid the reinstatement fee imposed as a result of the financial responsibility non-compliance suspension, or you have been granted by a court an extension of time within which you must pay reinstatement fees and limited driving privileges during the period of the extension as authorized by R.C. 4510.10, or you are filing a motion for an extension of time to pay outstanding reinstatement fees as authorized by R.C. 4510.10 with the petition, or you have a motion for an extension of time to pay outstanding reinstatement fees pending before this court in another proceeding.
5. You have filed proof of financial responsibility with the Bureau of Motor Vehicles.

You must attach to your petition (1) a copy of the BMV form advising of your suspension [Notice of Suspension] and (2) BMV Form 2006 [Notification/Reinstatement Requirements]. You can obtain these forms or other information at the Bureau of Motor Vehicles, 1583 Alum Creek Drive, Columbus Ohio 43209. If you are not sure you meet all the requirements or if you have any questions about your eligibility for limited driving privileges, you should consult an attorney before filing any petition.

It is your responsibility to present this information to the Court. Be advised that the court will not grant your request unless you have met all the statutory requirements. The filing fee of \$116.00 will not be refunded. NO PERSONAL CHECKS ACCEPTED.

May 9, 2006

**IN THE FRANKLIN COUNTY MUNICIPAL COURT
COLUMBUS, OHIO**

:Case No. _____

_____, :BMV Case No. _____
(Petitioner),

:DL No. _____

VS. :D.O.B. _____

Registrar, Ohio Bureau of Motor Vehicles,
(Respondent).

PETITION

Signature of Petitioner

Name

Address

City State Zip Code

()

Telephone Number

WORKSHEET FOR LIMITED DRIVING PRIVILEGES

PLEASE COMPLETE THIS WORKSHEET AND BRING WITH YOU TO THE HEARING.

Name			
Address			
City		State	Zip Code
Driver License Number	Date of Birth / /	Social Security Number	Phone Number

Company Name	Company Telephone Number ()	
Company Address		
City	State	Zip Code

1. I work the following schedule:

<u>DAYS OF THE WEEK</u>	<u>STARTING TIME</u> (a.m./p.m.)	<u>QUITTING TIME</u> (a.m./p.m.)
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____
Sunday	_____	_____

I NEED PRIVILEGES FOR OTHER REASONS:

Signed: X _____

Date: _____