

Ex Parte

Print your name

First Middle Last

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Cause No:

The clerk fills out below

District County Justice Court of:
_____ County, Texas

Petition for Occupational Driver's License

Print your answers:

My name is: _____
First Middle Last

I am the Petitioner, and I am asking the court for an Occupational Driver's License.

I ask the Court to consider the information I have provided below.

Upon approval of this Petition, I ask the Clerk to send a certified copy of the Petition and the court Order setting out the judge's findings and restrictions to the Texas Department of Public Safety.

I. Petitioner's Personal Information

1. Home address: _____
Street address City
_____, Texas
County Zip

2. Mailing address (if different from above): _____

3. Phone number: () _____

4. Email address: _____

5. Date of birth: _____
Month Day Year

6. The last four digits of my Social Security Number are . ____ . ____ . ____ . ____

Or

I do not have a Social Security Number.

II. Driver's License Information

5. 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: ____ / ____ / ____ .

6. Is your license suspended because of a physical or mental disability? Yes No

Is your license suspended for non-payment of child support? Yes No

Have you had 2 or more occupational driver's licenses because of a conviction in the last 10 years? Yes No

III. Notice to the State If Applicable

7. If any of the following are applicable, the Clerk of the Court should 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. 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 Conviction

IV. Suspensions and Charges

8. Why is 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.
(date)

B. I was arrested on / / , and I did not give a breath sample, as requested.
(date)

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?

YES NO

C. This court convicted me of _____ on (date) / / .

D. A Texas court determined that I am a "habitual violator of traffic laws."

E. 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? Be specific.)*

9. 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

If your license is suspended based on an alcohol-related offense under Penal Code 49.04 - 49.08 AND you are required to have an interlock device installed on each motor vehicle you own or operate, you do not need to complete Numbers 10, 11, and 12 below.

10. 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 of work.

Name of Employer #1: _____

Employer's Address: _____

Days and hours you work: _____

Job title: _____

Name of Employer #2: _____

Employer's Address: _____

Days and hours you work: _____

Job title: _____

I need to drive to **school**. (Fill out below):

School Name: _____

School Address: _____

Days and hours of your classes: _____

Other (explain): _____

11. Driving schedule you are requesting:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:	___ am/pm	___ am/pm	___ am/pm	___ am/pm	___ am/pm	___ am/pm	___ am/pm
To:	___ am/pm	___ am/pm	___ am/pm	___ am/pm	___ am/pm	___ am/pm	___ am/pm

12. If you are asking the Court to allow you to drive for more than 4 hours per day, explain why below:
