STATE O	F NORTH	CAROLINA			File No.			
County					In The General Court Of Justice ☐ District ☐ Superior Court Division			
	STATE	VERSUS				-		
STATE VERSUS Name And Address Of Applicant				LIMITED DRIVING PRIVILEGE WILLFUL REFUSAL				
					WILLIOL	KLI USAL		
Race	Sex	Height	Weight	_			G.S. 20-16.2	
Hair Color	Eye Color	Date Of Birth	1	Drivers License No).	State		
Offense Charged	L			<u> </u>		Date Of Refusal		
			FIND	INGS				
11						.1. (40)		
					e was revoked for twe, the Court finds the		s for willful refusal	
1. At the ti one yea		, the applicant held	d either a valid dri	vers license, or	a drivers license tha	at had been expir	ed for less than	
 At the time of the refusal, the applicant had not within the preceding seven (7) years been convicted of an offense involving impaired driving; 								
3. At the time of the refusal, the applicant had not in the preceding seven (7) years willfully refused to submit to a chemical analysis under G.S. 20-16.2;								
4. The implied-consent offense did not involve death or critical injury to another person;								
5. The underlying charge for which the applicant was requested to submit to a chemical analysis was finally disposed of (a) other than by conviction or (b) by a conviction of impaired driving under G.S. 20-138.1 at a punishment level authorizing issuance of a limited driving privilege under G.S. 20-179.3(b), and the applicant has complied with at least one of the mandatory conditions of probation listed for the punishment level under which he/she was sentenced, or (c) by a conviction of impaired driving under G.S. 20-138.2;								
Subsequent to the refusal, the applicant has had no unresolved pending charges for, or additional convictions of, an offense involving impaired driving;								
7. The applicant's drivers license has been revoked for at least six (6) months for the refusal;								
8. The records of the Division of Motor Vehicles and the Clerk of Superior Court in this county have been searched, and there are no revocations in effect other than a revocation under G.S. 20-16.2 for this willful refusal, and a revocation imposed under G.S. 20-17(a)(2), for the underlying charge;								
9. The defendant has obtained a substance abuse assessment and has successfully completed any recommended training or treatment program; and has filed with the Clerk a certificate of completion; (Mandatory for offenses committed on or after December 1, 1997.)								
10. The defendant was convicted under G.S. 20-138.1 and had an alcohol concentration of 0.16 0.15 (use for offenses committed on or after December 1, 2007) or more; (If this item is selected, the restrictions in G.S. 20-179.3(g5) apply to the defendant. If the offense was committed on or after December 1, 2007, the defendant is also subject to the restrictions in G.S. 20-179.3(c1).)								
			•		satisfied that the deskip shaped shap		cially responsible.	
			OR	DER				
It is ORDERED that the applicant be allowed a limited driving privilege to be effective from the date of this Order, to be used in accordance with the restrictions imposed in this form, and to expire twelve (12) months from the date on which the Division of Motor Vehicles notified the defendant that the defendant's drivers license was revoked pursuant to G.S. 20-16.2(d). The limited driving privilege is conditioned upon the maintenance of any financial responsibility required by G.S. 20-179.3(I) during the period of this privilege.								
Date		Name Of Judge (Typ	e Or Print)		Signature Of Judge			

RESTRICTIONS									
The driver shall not drink alcohol while driving or drive while any alcohol remains in his/her body. The driver shall not drive while having a controlled substance in his/her body unless such controlled substance was lawfully obtained and taken in therapeutically approved amounts. This limited driving privilege DOES NOT include the privilege of operating a commercial motor vehicle as defined in G.S. 20-4.01(3d). Standard working hours are from 6 AM to 8 PM, Monday - Friday.									
Driving is permitted only as follows: (check only applicable boxes.)									
1. (Do not check these items if 0.15 or greater alcohol concentration and offense committed on or after December 1, 2007.) Driving is permitted:									
Driving is permitted for work-related, religious worship, or educational purposes during standard working hours as follows:									
3. Driving is permitted for work-related, religious worship, or educational purposes during nonstandard working hours as follows:									
☐ The driver is self em	nployed and the required documen	tation for work-related drivir	ng is attached.						
4. Driving is restricted to: a. any non-commercial vehicle registered in the name of the driver. b. the following non-commercial vehicle(s):									
Commissioner	icle shall be equipped with a functi of Motor Vehicles and the defenda ehicle. The driver may drive to and	int shall personally activate	the ignition interlock syste	em before					
5. Additional restrictions:	Corrective Lenses	45 M.P.H. Only	Daylight Only	Other:					
Name And Address Of Community Service	Coordinator To Which Driver Assigned	Name And Address Of Employer	r Or Driver's Place Of Work						
	NOTICE/ACKNOWLE	DGMENT OF RECEIPT							
limited license to drive; that I mu breath, I may be subject to arrest limited driving privilege is invalid offense of driving while license of prescribed fee or complete the cand that my willful failure may all	nited driving privilege which contains the keep it in my possession during stand loss of this limited driving production of any restriction revoked under G.S. 20-28; that if community service within the time I leso result in other action authorized	the period of revocation; the period of revocation; the ivilege; that if my drivers lice imposed in connection with ommunity service has been imit imposed shall result in d by law for violation of a co	nat if I drive with the odor of the consection of this limited driving priviled ordered, my willful failure revocation of this limited of	of alcohol on my ther reason, this ge constitutes the to pay the					
Date		Signature Of Applicant							
CERTIFICATION									
I certify that this is a true and complete copy of the original on file in this case.									
Date	Signature		Deputy CSC Clerk Of Superior (Assistant CSC					