STA	TE OF N	ORTH (	CAROLINA	4			File No.				
			County	/			In The General Court Of Justice ☐ District ☐ Superior Court Division				
			VERSUS								
Name And	l Address Of Applic	eant				L	IMITED DRIVING PI WILLFUL REFU		EGE.		
Race	Sex		Height	Weigh	nt						
Hair Color	Eye C	olor	Date Of Birth			Drivers License	∍ No.		G.S. 20-16.2 State		
Offense C	harged							Date	Of Refusal		
					FIND	INGS					
refusal 1. 2. 3. 4. 5.	to submit to a At the time of one (1) year; At the time of impaired driving At the time of under G.S. 20. The implied-c. The underlying than by convictimited driving probation lister G.S. 20-138.2 Subsequent to involving impair the applicant The records on revocation G.S. 20-17(a) The applicant	chemical arthe refusal, the refusal, ag; the refusal, 1-16.2; consent offer g charge for ction or (b) privilege under for the public of the refusal aired driving a drivers lie of the Divisions in effect or (2), for the phas obtained has obtained	the applicant had the application of the application of the application of Motor Vehicular than a revocunderlying charged a substance applicant application of Motor Vehicular than a revocunderlying charged a substance applicant had a substance appl	g charged and the state of the	ged with an iter a valid driver a valid driver a valid driver at least dependent of the Clerk of	mplied-cons vers license, reding seven ing seven (7 njury to anot I to submit to nder G.S. 20 icant has con was sentence ved pending six (6) mont of Superior C 0-16.2 for th	o a chemical analysis was finally 0-138.1 at a punishment level aumplied with at least one of the moded, or (c) by a conviction of important charges for, or additional convictions for the refusal; court in this county have been se is willful refusal, and a revocation coessfully completed any recomme	en expir ffense i t to a ch dispose thorizin andator aired dr tions of, arched, n impos	ed for less than nvolving nemical analysis ed of (a) other g issuance of a ry conditions of riving under an offense and there are red under		
treatment program; and has filed with the Clerk a certificate of completion; (Mandatory for offenses committed on or after December 1, 1997.)  10. The applicant 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 applicant. If the offense was committed on or after December 1, 2007, the applicant is also subject to the restrictions in G.S. 20-179.3(c1).)  11 a. The Court has been furnished a properly executed form DL-123 and is satisfied that the applicant is financially responsible b. The applicant has executed form DL-123A and is not required to furnish proof of financial responsibility.											
						DER					
accorda Vehicle condition	ance with the res notified the a	estrictions i applicant the maintenance	mposed in this for at the applicant's se of any financia	orm, an	d to expire to license was	welve (12) m s revoked pu uired by G.S	ctive from the date of this Order, nonths from the date on which the date on which the irsuant to G.S. 20-16.2(d). The line 20-179.3(l) during the period of	e Divisi mited d	on of Motor riving privilege is		
Date		Name Of Judg	ge (type or print)				Signature Of Judge				

		RESTR	ICTIONS								
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 <b>DOES NOT</b> 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.											
Essential 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:     a. for emergency medical care at any time.     b. for maintenance of household during standard working hours as follows:											
c. for community se	ervice assignment as follow	s:									
2. Driving is permitted for	work-related, religious wor	rship, or educ	cational purpose	s during standar	d working hours as follows:						
3. Driving is permitted for	work-related, religious wor	rship or educ	ational purposes	during nonstand	dard working hours as follows:						
☐ The driver is self-er	mployed and the required d	ocumentation	for work-related	d driving is attacl	ned.						
4. Driving is restricted to:  a. any non-commercial vehicle registered in the name of the driver.  b. the following non-commercial vehicle(s):											
of Motor Vehi		rsonally activa	ate the ignition in	nterlock system l	rpe approved by the Commissioner pefore operating the vehicle. The rvice purposes.						
5. Additional restrictions: Other: (specify)	Corrective Len	ses	☐ 45 M.P.H. Or	nly 🗌 🛭	Daylight Only						
Name And Address Of Community Se	rvice Coordinator To Which Driver A	Assigned	Name And Address	Of Employer Or Drive	er's Place Of Work						
	NOTICE/AC	CKNOWLED	GMENT OF R	ECEIPT							
limited license to drive for ess I drive with the odor of alcohorevoked for any other reason driving privilege constitutes the my willful failure to pay the pr	sential purposes as set out ol on my breath, I may be so , this limited driving privileg ne offense of driving while li escribed fee or complete the	above; that I ubject to arrese is invalid; the icense revoke ne community	must keep it in r st and loss of thi nat a violation of ed under G.S. 20 service within the	ny possession d s limited driving any restriction ir 0-28; that if commone time limit impone	vilege. I understand that this is my uring the period of revocation; that if privilege; that if my drivers license is mposed in connection with this limited nunity service has been ordered, osed shall result in revocation of this violation of a condition of probation.						
Date			Signature Of Applica	nnt							
CERTIFICATION											
I certify that this is a true and	complete copy of the origin	nal on file in t	his case.								
Date	Signature				Deputy CSC Assistant CSC Clerk Of Superior Court						