| STA | TE O | F NORTH | CAROLIN | Α | | | File No. | | |
|---|--|---------------------|---------------------|--------------|----------------|--|---|--|------|
| County | | | | | | In The General Court Of Justice District Court Division | | | |
| IN THE MATTER OF | | | | | | | | | |
| Name And Address Of Applicant | | | | | | LIMITED DRIVING PRIVILEGE IMPAIRED DRIVING | | | |
| | | | | | | | • | ATE OR FEDERAL | |
| Race | | Sex | Height | Weight | | - | CON | VICTIONS) | |
| Nace | | Jex | rieigni | vveignt | | | | G.S. 20-1 | 79.3 |
| Hair Colo | r | Eye Color | Date Of Birth | | | Drivers Licen | se No. | State | |
| Date Of Offense | | | | | | Date Of Conviction | | | |
| NOTE | | | | | | | l because of a conviction an ignition interlock restri | in another jurisdiction substantially iction. | |
| | | | | | FIND | INGS | | | |
| Upon a | applicatio | n of the applicar | nt for a limited dr | iving privil | ege, the C | ourt finds th | nat: | | |
| | . The applicant's North Carolina drivers license is revoked because of a conviction in another jurisdiction on a charge substantially similar to impaired driving under G.S. 20-138.1; | | | | | | | | |
| □ 2. | The applicant would be eligible for a limited driving privilege if the conviction had occurred in North Carolina and, if applicable, the period of nonoperation has expired; | | | | | | | | |
| ☐ 3. | The records of the Division of Motor Vehicles and the Clerk of Superior Court in this county have been searched, and there are no other revocations in effect at this time; and | | | | | | | | |
| 4. | 4. <i>(check only one)</i> 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. | | | | | | | | |
| 5. | The app | licant has | has not | satisfied th | ne eligibility | y requireme | ents under G.S. 20-17 | 9.3 at this time. | |
| | | | | | ORI | DER | | | |
| It is ORDERED that the applicant be allowed a limited driving privilege to be effective on the date indicated below, to be used in accordance with the restrictions imposed on the reverse of this form, and to expire one year from the date on which the Division of Motor Vehicles revoked the applicant's drivers license pursuant to G.S. 20-23. This limited driving privilege is conditioned upon the maintenance of financial responsibility as required by G.S. 20-179.3(I) during the period of this privilege. | | | | | | | | | |
| 2. It is ORDERED that the applicant NOT be allowed a limited driving privilege at this time. Effective Date | | | | | | | | | |
| Ellective | Dale | | | | | Date | | | |
| | | | | | | Signature Of | Chief District Court Judge | | |
| | | | | | | Name Of Chi | ef District Court Judge (type | e or print) | |
| This pri | d solely be | o longer valid afte | n of Motor Vehicles | | | | | or if your drivers license remains ance abuse treatment program or an | |

Certified Copy - Applicant (Over)

Copy - DMV

Original - File

| | RESTR | CTIONS | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| 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). Driving when essential for emergency medical care is authorized at any time. Standard working hours are from 6 AM to 8 PM, Monday - Friday. | | | | | | | | | |
| Essential driving, other than f | or emergency medical care, is permitted | I only as follows: (check only appli | cable boxes) | | | | | | |
| 1. Driving is permitted for | work-related, religious worship, or educ | ational purposes during standard | d working hours as follows: | | | | | | |
| 2. Driving is permitted for | maintenance of household during stand | ard working hours as follows: | | | | | | | |
| 3. Driving is permitted for | work-related, religious worship, or educ | ational purposes during nonstan | dard working hours as follows: | | | | | | |
| The driver is self-employed and the required documentation for work-related driving is attached. | | | | | | | | | |
| 4. Driving is permitted for assessment or treatment. | community service assignment, Alcoholent as follows: | and Drug Education Traffic Sch | ool, and substance abuse | | | | | | |
| 5. Driving is restricted to: a. any non-commercial vehicle registered in the name of the driver. b. the following non-commercial vehicle(s): 6. Additional restrictions: Corrective Lenses 45 M.P.H. Only Daylight Only | | | | | | | | | |
| Other: (specify) | | | | | | | | | |
| Name And Address Of ADET School, (Treatment Facility To Which Driver Ass | Community Service Coordinator, Or Mental Health igned | Name And Address Of Employer Or Drive | r's Place Of Work | | | | | | |
| | NOTICE/ACKNOWLED | GMENT OF RECEIPT | | | | | | | |
| with the odor of alcohol on m limited license to drive for ess if my drivers license is revoke connection with this limited di service has been ordered, my | Ilimited driving privilege which contains y breath, I may be subject to arrest and sential purposes as set out above; that I do for any other reason, this limited driving privilege constitutes the offense of y willful failure to pay the prescribed fee his limited driving privilege; and that my value. | loss of this limited driving priviled must keep it in my possession d ng privilege is invalid; that a viola driving while license revoked ur or complete the community servi | ge; I understand that this is my uring the period of revocation; that tion of any restriction imposed in der G.S. 20-28; that if community ice within the time limit imposed | | | | | | |
| Date | | Signature Of Driver | | | | | | | |
| CERTIFICATION | | | | | | | | | |
| I certify that this is a true and complete copy of the original on file in this case. | | | | | | | | | |
| Date | Signature | | Deputy CSC Assistant CSC Clerk Of Superior Court | | | | | | |