## **KETTERING MUNICIPAL COURT**

Case #:			

## LIMITED DRIVING PRIVILEGES - LOCATIONS/HOURS REQUEST

The judge may grant UP TO **A MAXIMUM** of 12 hours a day/5 days or 10 hours a day/6 days per week of driving privileges **IF REQUIRED** for work, school, family needs or medical treatment/counseling – if determined to be reasonable by the judge.

Full Name:	Date of Birth:
Current Address:	City/State/Zip:
Home Phone: ()	Cell Phone: () Email:
	WORK INFORMATION
Employer Name:	Employer Phone: ()
Employer Address/City/State: _	
Days/Hours of Work:	
Supervisor Name and Phone:	
Travel Time To Work:	Are you required to drive during your work hours? Yes No  (NOTE: Permits are not valid for Commercial Vehicles)
	Employer Phone: ()
Employer Address/City/State:	
Supervisor Name and Phone:	
Travel Time To Work:	Are you required to drive during your work hours? Yes No
	SCHOOL INFORMATION
School Name:	Travel Time to School:
School Address/City/State:	
NOTE: You must carry your	current class schedule with you when driving If School Privileges granted
(Please sp	OTHER SPECIFIC PRIVILEGES ecify days/times/address/reason/provider name and phone if applicable)
Applicant Signature:	Date:
responsibility for your vehicl permit will be valid for the case	proof of insurance: You are required to provide proof of liability insurance/financial e and you may be required to have FRA (SR 22 or BOND) insurance. If granted, this (s) listed above. It is not valid for any other suspensions imposed by any other Court or by
the Bureau of Motor Vehicles in	
Judge's Action-Follow-up:	Clerk's Office: Insurance verified
=	s ApprovedNot eligible for Privileges until the following issues are resolved with the BMV:

Judge's Signature

Date