

Ex Parte
Print your name:

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IN THE JUSTICE COURT
PRECINCT 5, PLACE 2
DALLAS COUNTY, TEXAS

First Middle Last

Petition for Occupational Driver's License

Print your answers

I swear under oath that the information I provide in this Petition is true and correct.

My name is: _____
First Middle Last

I am the Petitioner, and I am asking the court for an Occupational Driver's License (ODL)
I ask the Clerk to mail a certified copy of this Petition to The Texas Department of Public Safety
I ask the Court to consider the information I have provided below.

Petitioner's Personal Information

Home address: _____ City _____ Texas, Zip _____

Mailing address (if different from above): _____

Phone number: (____) _____

Date of birth: Month _____ Day _____ Year _____

Driver's License No.: _____ License issued by: _____ (State)

Was your license suspended because of a physical or mental disability? Yes No

Have you had 2 or more occupational driver's licenses in the past 10 years? Yes No

Why was your Driver's License suspended? (all that apply)

- I did not give a breath sample, as requested, when I was arrested for _____
- This court convicted me of a Traffic Violation, e.g. _____ on Month _____ Day _____ Year 20_____
- A Texas court said I am a "habitual violator of traffic laws" on (date): Month _____ Day _____ Year 20_____
- A Texas court ordered me to go to a Driver Education Program, and my license, permit, and/or driving privilege was automatically suspended for 365 days
- Other (If you did not any of the above, why was your license suspended? Be specific). _____

Why do you need an Occupational Driver's License? (all that apply):

I need to drive to work because there is no public transportation to and from my work. (Fill out below):

Name and address of your employer: _____

Days and hours you work: _____ Job Title: _____

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

Name and address of your school: _____

Days and hours of your classes: _____

OTHER (explain): _____

Driving schedule you are requesting

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
FROM:	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.
TO:	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.	_____ <input type="checkbox"/> A.M. _____ <input type="checkbox"/> P.M.

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

I ask the Court to make an Order that allows me to get an Occupational Driver's License to drive for the purposes described above.

Do not sign until you are in front of the Notary

Petitioner's name (print)

► _____ Date _____
Petitioner's signature

NOTARY FILLS OUT BELOW

State of Texas, County of _____
Sworn to and subscribed before me, the undersigned authority, on this date: _____
By _____
(Print the first and last names of the person who is signing this affidavit)

NOTARY SEAL

► _____
Notary Signature

See below for a list of documents you MUST attach to this Petition

- A certified copy of my official driver's license record obtained through Department of Public Service. AT TIME OF FILING
- Proof of current valid auto liability insurance or a copy of an SR22 from my insurance company. AT TIME OF FILING
- Pay a filing Fee of \$61.00. AT TIME OF FILING
- Occupational Driver's License Order (Petitioner's Section Completed ONLY) AT HEARING DATE
- A copy of the Court Order that suspended my license. AT HEARING DATE
- A letter from employer, immediate supervisor or school administrator on employer or school letterhead (or an affidavit) that verifies my work or school schedule. AT HEARING DATE