

**GUIDELINES FOR APPLICANTS
FOR OCCUPATIONAL DRIVER'S LICENSE
IN COUNTY CRIMINAL COURT AT LAW #11**

Petitioners, please read the following instructions carefully **before** paying your filing fee!

1. Please be advised that the judge will require these items from the Petitioner **prior to the hearing**:
 - a. Proof of SR-22 insurance, (insurance must cover the **entire** period of suspension) and
 - b. Results of a substance abuse evaluation (See Court staff for information)
 - c. An Occupational Driver's License **Data Sheet**, completely filled out and signed by the Petitioner. (This is a *different document* than the application filed with the clerk. Obtain from Court staff.)
2. If the underlying case is a DWI, ignition interlock device is typically required. If so, the Court **will not** issue a license until the device is properly installed on the vehicle.
 - a. It is advisable to have the device already installed on your vehicle if you expect to obtain a license on the date of your hearing. (Obtain **Installation Order** from Court staff.)
 - b. Obtain and complete the necessary paperwork, such as the **Ignition Interlock Affidavit**, *prior to the hearing*.
3. All applicants will be ordered to abstain from the use of illegal drugs and alcohol. A urinalysis may be required.
4. The judge prepares her own orders. It is **not** necessary to bring a pre-prepared order to court.

DATA SHEET FOR OCCUPATIONAL DRIVER'S LICENSE HEARING

Petitioner's Personal Information

Name on your Texas Driver's License	Date of Birth	Original Cause Number
Home Address		
Home Telephone	Work Telephone	Cell Phone
Vehicle Insurance Company	Policy Number	Expiration Date
Employer	Type of Work	
Employer's Address		

Are you presently under ALR suspension? **Yes / No** Do you drive a company-owned vehicle? **Yes / No**

Are you presently on probation / deferred adjudication? **Yes / No** If so, in which court(s)? _____

If original offense was DWI, did you take a breath or blood test? **Yes / No** If so, what was the result? ._____

Do you presently have an ignition interlock device on your vehicle? **Yes / No**

Have you ever had a restricted or occupational driver's license in the past? **Yes / No** If so, when? _____

List below **all** previous arrests and dispositions, including traffic violations:

<u>Charge</u>	<u>Court</u>	<u>Disposition</u>	<u>Date of Disposition</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use additional page to continue, if needed. Disclose **all** previous arrests and dispositions.)

What is your reason for requesting a restricted driver's license? (**Check all that apply.**)

- Transportation to and from work / school, namely: _____
 - I typically leave my house at ____ a.m. / p.m. and leave my work to return home at ____ a.m. / p.m.
 - I typically **do / do not** drive during my work hours.
- To perform household duties, namely: _____
- Other, namely: _____

Petitioner's Affidavit

I, _____, solemnly swear that the information I have provided in this Data Sheet is true and correct to the best of my knowledge. I WILL CONTINUE TO PROVIDE THE COURT WITH MY CORRECT ADDRESS AND PHONE NUMBER. Failure to provide this information may result in my inability to receive notice of, and contest, any revocation of my restricted driver's license.

Date: _____

Petitioner

(Continue on reverse. ↩)

RDL Worksheet

Offense Causing Suspension

Date of Conviction

Date Suspension Ends

Counties Requested in addition to Harris County

Days of the Week Requested:

and

Hours Requested:

_____ to _____

from _____ a.m. / p.m. to _____ a.m. / p.m.

_____ to _____

from _____ a.m. / p.m. to _____ a.m. / p.m.

_____ to _____

from _____ a.m. / p.m. to _____ a.m. / p.m.

_____ to _____

from _____ a.m. / p.m. to _____ a.m. / p.m.

Stop here. Did you fill out the reverse side? 🖱

Do not write below this line. For official use only.

Days and hours of operation approved as requested above.

Days and hours of operation granted as indicated below:

Days of the Week Granted:

and

Hours Granted:

_____ to _____

from _____ a.m. / p.m. to _____ a.m. / p.m.

_____ to _____

from _____ a.m. / p.m. to _____ a.m. / p.m.

_____ to _____

from _____ a.m. / p.m. to _____ a.m. / p.m.

_____ to _____

from _____ a.m. / p.m. to _____ a.m. / p.m.

Required by Court:

- SALCE
- SR-22 Insurance
- Ignition Interlock
- AA / NA: ____ in ____ days
- UA from private lab
- Other: _____

Provided by Petitioner:

- SALCE score: _____
- SR-22 Insurance
- Ignition Interlock
- AA / NA: ____ in ____ days
- UA results: _____
- Other: _____

STANDING ORDER FOR DRIVERS WITH IGNITION INTERLOCK

in and for County Criminal Court at Law # _____

Harris County, Texas

The undersigned Judge of said Court hereby enters the following Standing Orders for all petitioners granted occupational driver's licenses with an ignition interlock requirement in this Court:

You are hereby ORDERED to operate only a motor vehicle equipped a court-approved, camera-equipped ignition interlock device, properly installed and maintained in your vehicle. The only acceptable exemption from this requirement is the operation of an employer's company-owned vehicle, **only** if used in the normal course and scope of petitioner's employment, and only with the court's prior approval written in Petitioner's occupational driver's license.

Further, you are hereby ORDERED that you may **only** operate a motor vehicle during the hours and days approved by the court.

You are hereby that when you are unable to use your vehicle equipped with an ignition interlock device you **must** use alternate means of transportation such as taxis, buses, and rides from friends and family. **There are no exceptions to this order.**

You are hereby ORDERED that you must not use any alcohol or drugs whatsoever prior to operating a motor vehicle. You must not use products containing alcohol, such as mouthwash and medicines containing alcohol such as cough syrup, prior to the operation of your vehicle. Even a very small amount of alcohol detected by the ignition interlock device may be used in a hearing to revoke your occupational driver's license.

You are hereby ORDERED that you must follow all regulations of your ignition interlock vendor regarding the care, maintenance and periodic calibration of your ignition interlock device. You must never attempt to disable or tamper with your ignition interlock device.

You are further ORDERED to behave in a courteous and respectful manner at all times with your ignition interlock vendor and all court personnel.

SIGNED AND ORDERED this _____ day of _____, 20____.

Hon. _____
Judge Presiding

(Please read and continue on reverse side. 🖱)

IN RE § COUNTY CRIMINAL COURT
§ AT LAW NO. _____
_____ § HARRIS COUNTY, TEXAS

PETITIONER'S AFFIDAVIT AND ACKNOWLEDGMENT

Please initial each of the following acknowledgments:

_____ I, _____, Petitioner, have read and discussed the foregoing Standing Order **with my attorney**. I fully understand each and every requirement of this Order and hereby attest that I will abide by this Order.

_____ I understand that I must not operate any motor vehicle unless it has a court-approved, camera-equipped ignition interlock device, properly installed and maintained in my vehicle.

_____ I understand that when I am unable to use my vehicle equipped with an ignition interlock device I **must** use alternate means of transportation such as taxis, buses, and rides from friends and family. **There are no exceptions to this rule.**

_____ I understand that when my vehicle is in a repair shop I **must** notify my ignition interlock vendor **and the court** immediately of the location of my vehicle. When my car is returned to me, I must provide written documentation to verify repair.

_____ I understand that my employer's company-owned vehicles are exempt from the ignition interlock requirement **only** if I use the vehicle in the normal course and scope of my employment, and only with the court's prior written approval.

_____ I understand that I must not use any alcohol or drugs whatsoever prior to operating a motor vehicle. I must not use products containing alcohol, such as mouthwash and medicines containing alcohol such as cough syrup prior to the operation of my vehicle. Even a small amount of alcohol detected by the ignition interlock device may cause revocation of my occupational driver's license.

_____ I understand that I must follow all regulations of my ignition interlock vendor regarding the care, maintenance and periodic calibration my ignition interlock device.

_____ I understand that I must never attempt to disable or tamper with my ignition interlock device.

_____ I further understand that I must behave in a courteous and respectful manner at all times with my ignition interlock vendor and all court personnel.

_____ I further understand that if I fail to abide by the above specified court orders that in addition to revocation of my restricted driver's license, I may additionally be subject to further prosecution for **contempt of court**.

Petitioner

I have consulted with the petitioner and fully explained all of the matters contained in this instrument and the preceding Standing Order.

Petitioner's Attorney