

**PETITION FOR RESTORATION OF DRIVING PRIVILEGE** – Case No. ....

**THIRD OFFENSE** COMMONWEALTH OF VIRGINIA

HEARING DATE AND TIME

.....  
.....  
.....

..... Circuit Court  
CITY OR COUNTY

.....  
PETITIONER'S NAME

.....  
ADDRESS

COMPLETE DATA BELOW IF KNOWN

RACE	SEX	MO.	BORN DAY	YR.	FT.	HT. IN.	WGT.	EYES	HAIR
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SSN:  
.....

**TO THE JUDGE OF THE ABOVE-NAMED COURT:**

I respectfully represent that on ....., my driver's license was revoked by the Department of Motor Vehicles, pursuant to Virginia Code § 46.2-391 (B), based on the following convictions:

.....  
OFFENSE                                      OFFENSE DATE                                      CONVICTION DATE                                      CONVICTING COURT

.....  
OFFENSE                                      OFFENSE DATE                                      CONVICTION DATE                                      CONVICTING COURT

.....  
OFFENSE                                      OFFENSE DATE                                      CONVICTION DATE                                      CONVICTING COURT

I have attached a certified transcript of my driving record from the Department of Motor Vehicles.

**CHECK A OR B BELOW TO INDICATE THE BASIS OF YOUR PETITION AND COMPLETE OTHER SECTIONS AS APPLICABLE:**

A. Restoration under Va. Code § 46.2-391(C)(1). (Eligible only after five (5) years from the date of the last conviction.) My license was revoked based on and dependent upon three convictions pursuant to Va. Code § 18.2-266, § 18.2-51.4 or Subsection A of § 46.2-341.24 or valid local ordinance or law of another state or jurisdiction relating to operating a motor vehicle under the influence of intoxicants or drugs.

I represent that:

- (i) At the time of my convictions, I was addicted to or psychologically dependent on the use of alcohol or other drugs; and
- (ii) At this time, I am no longer addicted to or psychologically dependent on the use of alcohol or other drugs; and
- (iii) At least five years have passed from the date of the last conviction upon which the revocation of my license was based; and
- (iv) I do not constitute a threat to the safety and welfare of myself or others with respect to the operation of a motor vehicle.

I request that the Court restore my privilege to operate a motor vehicle in the Commonwealth upon my evaluation by the Virginia Alcohol Safety Action Program.

**If the Court does not restore my privilege to operate a motor vehicle in the Commonwealth as requested above, I further request, as indicated by completing the next section, that the Court authorize the issuance of a restricted license in lieu of restoring my privilege to drive as provided in Va. Code § 46.2-391(C)(1). I request that the Court grant the restricted driver's license for travel to and from the following locations for the following purpose(s):**

- Travel to/from the facility that installed or monitors the ignition interlock on your vehicle(s), if ignition interlock is ordered.
- Travel to/from work  Travel to/from VASAP  Travel during work
- Travel to/from school  Travel to/from school for child
- Travel to/from day care for child
- Travel to/from medical service facility for  you  minor child  elderly parent  
 person residing in household: .....
- Travel to/from court ordered visitation with child or children
- Travel to/from appointments with probation officer
- Travel to/from programs required by court or as a condition of probation
- Travel to/from a place of religious worship

.....  
NAME AND LOCATION OF PLACE OF WORSHIP

.....  
REQUESTED DAY OF WEEK AND TIME FOR TRAVEL

- Travel to/from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in an administrative or court-ordered intensive case monitoring program for child support
- Travel to/from jail to serve a sentence on weekends or nonconsecutive days
- Travel to/from a job interview for which you have with you written proof from your prospective employer of the date, time, and location of the job interview.

.....  
NAME AND ADDRESS OF EMPLOYER DAYS AND HOURS WORKED

- Travel to/from the offices of the Virginia Employment Commission for the purpose of seeking employment.

B. Restricted License under Va. Code § 46.2-391(C)(2). (Eligible only after three (3) years from the date of your last conviction.)

My license was revoked based on and dependent upon three convictions pursuant to Va. Code § 18.2-266, § 18.2-51.4 or Subsection A of § 46.2-341.24 or valid local ordinance or law of another state or jurisdiction relating to operating a motor vehicle under the influence of intoxicants or drugs.

I represent that:

- (i) At the time of my convictions, I was addicted to or psychologically dependent on the use of alcohol or other drugs; and
- (ii) At this time I am no longer addicted to or psychologically dependent on the use of alcohol or other drugs; and
- (iii) At least three years have passed from the date of the last conviction upon which the revocation of my license is based; and
- (iv) I do not constitute a threat to the safety and welfare of myself or others with respect to the operation of a motor vehicle.

I request that the Court order the issuance of a restricted license to allow me to drive to and from my home to the place of my employment, upon evaluation by the Virginia Alcohol Safety Action Program.

.....  
NAME AND ADDRESS OF EMPLOYER DAYS AND HOURS WORKED

I request that the court hold a hearing on my petition.

.....  
DATE

.....  
PETITIONER'S SIGNATURE