

**COURT CASE FORMS –  
TRAFFIC**

**DC-200 SERIES**

**DISTRICT COURT MANUAL  
FORMS VOLUME**

**Using This Form**

This form is supplied by general district or juvenile and domestic relations district court clerks to law enforcement agencies. This notice is issued to defendants who have been charged with driving under the influence (Virginia Code §§ 18.2-266, 18.2-51.4 or similar local ordinance) or who have refused to submit to a breath or blood test (Virginia Code § 18.2-268.3). The issuance and service of form DC-201 begins the administrative suspension of the defendant's operator's license or privilege to drive for seven days. If the defendant possesses a valid Virginia license, the license is attached to form DC-201.

The DC-201 notice, with attached Virginia operator's license, is returned either to the general district court or to the juvenile and domestic relations district court by the magistrate. The clerk of the appropriate court indexes the notice as a new civil case and docketts the case for the expiration of the seven-day suspension period or the next working day thereafter. Following the expiration of the suspension period, the clerk is required to return promptly the Virginia operator's license to the defendant.

**NOTICE OF ADMINISTRATIVE SUSPENSION OF DRIVER'S LICENSE/DRIVING PRIVILEGE**

Commonwealth of Virginia Va. Code §§ 46.2-391.2

Case No. : ..... **1** .....

[ ] Juvenile and Domestic Relations District Court  
[ ] General District Court

..... **2** .....

..... **3** .....  
ADDRESS

..... **4** ..... **5** ..... **6** ..... **7** .....  
NAME: LAST FIRST MIDDLE SOCIAL SECURITY NUMBER DATE OF BIRTH [ ] Male [ ] Female

.....  
RESIDENCE ADDRESS CITY/TOWN STATE ZIP

**8** Mailing Address: [ ] Same as above  
[ ] Change from D.L. ....

.....  
P.O. BOX/STREET CITY/TOWN STATE ZIP  
Driver's License surrendered pursuant to Virginia Code § 46.2-391.2: [ ] yes [ ] no ..... **10** ..... **10** .....  
DRIVER'S LICENSE NO. STATE OF LICENSE

**11** [ ] Virginia license otherwise suspended or revoked. .... **12** .....  
VUS NO.

**YOU ARE HEREBY NOTIFIED THAT YOUR PRIVILEGE TO DRIVE IN VIRGINIA IS SUSPENDED, AND ANY DRIVER'S LICENSE ISSUED TO YOU BY THE COMMONWEALTH OF VIRGINIA IS ALSO HEREBY SUSPENDED, FOR A PERIOD OF:**

**13** [ ] SEVEN DAYS (CHARGED WITH A FIRST OFFENSE) [ ] 60 DAYS, OR DATE OF TRIAL, WHICHEVER OCCURS FIRST (CHARGED WITH A SECOND OFFENSE), OR  
[ ] UNTIL DATE OF TRIAL (CHARGED WITH A THIRD OFFENSE),

**FROM THE DATE AND TIME STATED BELOW, PURSUANT TO VIRGINIA CODE § 46.2-391.2, BECAUSE:**

**14** { [ ] You have submitted to a breath test pursuant to Virginia Code § 18.2-268.2, or a similar local ordinance, and either  
[ ] the results show a blood alcohol content of 0.08 percent or more by weight by volume or 0.08 grams or more per 210 liters of breath, which has led to the issuance of a petition, summons or warrant against you for a violation of Virginia Code §§ 18.2-51.4, 18.2-266 or a similar local ordinance, or  
[ ] you are under 21 years of age, and the results show a blood alcohol concentration of 0.02 percent or more by weight by volume or 0.02 grams or more per 210 liters of breath, which has led to the issuance of a petition, summons or warrant against you for a violation of Virginia Code §18.2-266.1 or a similar local ordinance, **or**  
[ ] A petition, summons or warrant has been issued against you because of your refusal to submit to a breath or blood test in violation of Virginia Code § 18.2-268.3, or a similar local ordinance.

You must surrender any driver's license you hold issued by the Commonwealth of Virginia to the arresting officer, who will deliver it to the magistrate, who will forward it to the clerk of the Court for the City/County noted at the top of this form.

The clerk of the Court will return your license to you at the end of the suspension period or the first day thereafter that is not a weekend or holiday, unless your license is otherwise suspended or revoked. You may pick up your license at the clerk's office at the end of the suspension period or you may make arrangements to have the clerk mail your license to you. (See reverse side.)

You may request that the Court named above review the suspension. In order to do so, you must file with the clerk of the above identified court a MOTION FOR REVIEW OF ADMINISTRATIVE SUSPENSION OF DRIVER'S LICENSE/DRIVING PRIVILEGE on a form available at the clerk's office. The court is authorized to rescind the suspension only if you prove by a preponderance of the evidence that there was no probable cause for the arrest or that the magistrate did not have probable cause to issue the warrant or that there was no probable cause for the issuance of the petition. The court may reduce the period of suspension only if it finds that there was no probable cause to charge a second, third or subsequent offense.

Executed by serving a copy of this Notice of Administrative Suspension on the above-identified driver, in person, on this date and time.

..... **15** ..... [ ] a.m. [ ] p.m.  
DATE AND TIME

..... **16** .....  
SIGNATURE OF ARRESTING OFFICER

..... **17** .....  
NAME OF ARRESTING OFFICER

..... **18** .....  
BADGE NO.

..... **19** .....  
AGENCY

**Data Elements, front**

1. Court case number.
2. Court name and type. Check appropriate box.
3. Address of the court.
4. Name of offender.
5. Social security number of offender.
6. Birth date of offender.
7. Check appropriate box.
8. Address of defendant. Check appropriate box. If address is not the same as on the driver's license, enter appropriate information.
9. Check appropriate box whether driver's license surrendered.
10. Driver's license number and state issuing.
11. Check if Virginia license otherwise suspended or revoked.
12. Number of Virginia Uniform Summons, if issued.
13. Check appropriate box what corresponds with the offense charged.
14. Check appropriate box(es).
15. Date and time of service.
16. Signature of arresting officer.
17. Print name of arresting officer.
18. Badge number of arresting officer.
19. Agency of arresting officer.

**RETURN OF LICENSE**

**1**  I hereby request that the clerk return my driver's license to me by mail at the following address: .....

.....

I understand that my license will either be mailed after the license suspension period has terminated or returned at trial, but only if my license is not otherwise suspended or revoked at the time, and that no mailings will take place on weekends or holidays.

**2**

.....  
DATE AND TIME

**3**

.....  
SIGNATURE OF DRIVER

---

**Clerk's Office**

**4**

- License returned in person to above-identified driver.
- License mailed to above-identified driver at address given above.
- License mailed to above-identified driver at .....  

ADDRESS	CITY	STATE	ZIP
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- License not returned to above-identified driver because otherwise suspended or revoked.     License forwarded to the Virginia Department of Motor Vehicles.
- License delivered to circuit court after preliminary hearing in district court and certification of charge to the grand jury.

**5**

.....  
DATE AND TIME

**6**

.....  
 CLERK                       DEPUTY CLERK

**Data Elements, *reverse***

1. Driver checks if requests license returned by mail.
2. Time and date signed.
3. Signature of driver.
4. Check appropriate box regarding return of license.
5. Time and date received.
6. Clerk's or deputy clerk's signature.

**Using This Form**

1. Copies – (Contact the court to determine if you should bring copies to the Clerk's Office or if copies will be made upon filing.)
  - a. Original – to court.
  - b. First copy – to person whose license or privilege has been suspended.
2. The form is completed by the person whose license or privilege has been administratively suspended. The clerk schedules the court date for hearing of the motion for the next day the court will sit, and inserts the court date and time on form DC-202.
3. Attachments – DC-201, NOTICE OF ADMINISTRATIVE SUSPENSION OF DRIVER'S LICENSE/DRIVING PRIVILEGE
4. Preparation Details

Form DC-202 is the form that should be used to request the court to review the administrative suspension of a driver's license prior to the expiration of the suspension period.

MOTION FOR REVIEW OF ADMINISTRATIVE SUSPENSION OF DRIVER'S LICENSE/DRIVING PRIVILEGE

MOTION FOR REVIEW OF ADMINISTRATIVE SUSPENSION OF DRIVER'S LICENSE/DRIVING PRIVILEGE

Case No. 1

HEARING DATE AND TIME

Commonwealth of Virginia Va. Code § 46.2-391.2

2

- [ ] General District Court
[ ] Juvenile and Domestic Relations District Court

3 CITY/COUNTY

4 NAME OF LICENSE HOLDER/DRIVER

5 RESIDENCE ADDRESS

6 DRIVER'S LICENSE NUMBER

7 STATE

8 SOCIAL SECURITY NUMBER

10 I request that the above-identified Court review the administrative suspension of my driver's license/driving privilege imposed effective 9 [ ] for a period of seven (7) days, [ ] for a period of 60 days or until date of trial, whichever occurs first [ ] until date of trial pursuant to Virginia Code § 46.2-391.2. I understand that the court may rescind the suspension only if I prove at the hearing, by a preponderance of the evidence, that there was no probable cause for my arrest or that the magistrate did not have probable cause to issue the warrant or that there was no probable cause for the issuance of the petition. The court may reduce the period of suspension only if it finds that there was no probable cause to charge a second, third or subsequent offense. I have received a copy of the Motion for Review and understand that if I fail to attend the hearing as indicated above, without just cause, my right to review will be waived.

11

DATE

12

SIGNATURE OF LICENSE HOLDER

ORDER AND NOTICE

The administrative suspension of the driver's license/driving privilege of the above-named driver pursuant to Virginia Code § 46.2-391.2

[ ] is affirmed.

[ ] is reduced to [ ] sixty days or date of trial, whichever occurs first [ ] seven days from the effective date of this administrative license suspension noted above. The Clerk shall deliver to the license holder/driver a notice that the suspension has been reduced and forwarded to the Commissioner of the Department of Motor Vehicles a copy of the notice that the suspension under Virginia Code § 46.2-391.2 has been rescinded. The license holder will be provided with a certificate copy of this order to carry for the remainder of the reduced suspension period.

13

[ ] is rescinded. The Clerk shall return the suspended license, if any, to the license holder (unless the license has been otherwise suspended or revoked), deliver to the license holder/driver a notice that the suspension has been rescinded, and forward to the Commissioner of the Department of Motor Vehicles a copy of the notice that the suspension under Virginia Code § 46.2-391.2 has been rescinded. The license holder will be provided with a certified copy of this order to carry for the remainder of the rescinded suspension period.

[ ] is rescinded, but license not returned as license is otherwise revoked or suspended.

14 [ ] The license holder/driver failed to appear without just cause and thereby waived his/her right to have the suspension reviewed.

15

DATE

16

JUDGE'S SIGNATURE

FOR USE BY CLERK'S OFFICE

17 [ ] License returned to license holder.

17 [ ] License not returned as license is otherwise suspended or revoked.

[ ] License not returned because administrative suspension affirmed or reduced.

[ ] License not returned because license holder/driver failed to appear.

18

DATE

19

[ ] CLERK [ ] DEPUTY CLERK



**Data Elements**

To be completed by the clerk at the time of filing:

1. Court case number.
2. Hearing date and time.
3. City or county where court is located. Check applicable box for type of court.
4. Name of driver.
5. Address of driver.
6. Driver's license number.
7. State where license was issued.
8. Social security number of driver.
9. Date administrative suspension of license effective.
10. Check appropriate box for length of time of period of license suspension.
11. Date motion signed.
12. Signature of license holder/driver.

To be completed by judge at the hearing:

13. Check appropriate box reflecting disposition of motion.
14. Check if driver failed to appear.
15. Date signed.
16. Judge's signature.

For court use only:

17. Check appropriate box regarding return of license.
18. Date signed.
19. Clerk's or deputy clerk's signature.

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**Using This Form**

1. Copies
  - a. Original – to court.
  - b. First copy – to Department of Motor Vehicles (if not on interface).
  - c. Second copy – to defendant.
2. Prepared by clerk, signed by defendant, also signed by judge or clerk as witness.
3. Attachments (to first copy ONLY) – Abstract of Conviction (traffic) if used in connection with a current case.
4. Preparation details
  - a. This form should be used in all traffic cases in which the defendant's driver's license is suspended or revoked by the court, and also where deferred or installment payment of fines, costs, forfeiture, restitution and or penalty is allowed.
  - b. This form is designed to be used with suspensions and revocations that are a part of the sentence and with suspensions ordered by the court for failure to pay fines, costs, forfeiture, restitution and/or penalty. When used in these situations, this form is sent to the Department of Motor Vehicles together with the written abstract of conviction.
  - c. This form can also be used to give notice of suspension or revocation of driver's license imposed by another court or by the Department of Motor Vehicles or which was imposed by the trial court in an earlier case. When used in these situations, this form is sent to the Department of Motor Vehicles separate from any written abstract of conviction.
  - d. By using Date Element No. 10, a deferred effective date of the suspension or revocation may be used with this form (for example, to allow the 10-day delay required by Va. Code § 46.2-395).
  - e. If the court of the clerk administratively adjusts the amount of the deferred payment to include additional costs, a notice must be sent to the petitioner at his address of record.
  - f. The lower section of this form is to be used as a petition and order to provide for deferred payment, payment in installments or payment through community service.

**I. ACKNOWLEDGMENT OF SUSPENSION OR REVOCATION OF DRIVER'S LICENSE**

Commonwealth of Virginia Va. Code §§ 19.2-354, 19.2-358, 46.2-395

Case no(s): ..... **1** .....

Court date: ..... **2** .....

Juvenile and Domestic Relations District Court

General District Court

..... **3** .....  
CITY/COUNTY

..... **4** .....  
COURT ADDRESS

..... **5** .....  
NAME OF DEFENDANT/JUVENILE

DL NO ..... **6** .....

SSN ..... **7** .....

..... **8** .....  
RESIDENCE ADDRESS

..... **9** .....  
MAILING ADDRESS IF DIFFERENT FROM ABOVE

I acknowledge that I have been notified that my driver's license/driving privilege:

**10**  is suspended or revoked for a period of ..... effective ..... as a result of

**11**  my conviction by this court or  .....

**12**  action taken by the Virginia Department of Motor Vehicles pursuant to Va. Code § 46.2-390.1 for the Court's conviction or finding of facts sufficient to convict the offender of violating the drug laws (Va. Code §§ 18.2-247 through 18.2-264) of this Commonwealth.

**13**  determination by the Virginia Department of Motor Vehicles  ..... that I am a habitual offender

**14**  has been suspended  effective thirty days from the date of sentencing

effective .....

pursuant to Va. Code § 46.2-395 as a result of my failure to pay all or part of my fines, costs, forfeiture, restitution, and/or penalty of \$ ..... **15** ..... plus any additional court-appointed attorney fee, if applicable,

**16**  has been suspended effective .....

if the Alcohol Safety Action Program fee of \$ ..... **17** ..... is not paid by that date.

I further certify that on this date this notice, including Part I, was read, understood by me, a copy given to me and that my license

**18**  WAS  WAS NOT surrendered to this Court.

..... **19** .....  
DATE

..... **20** .....  
DEFENDANT

Witnessed by: ..... **21** .....

*SEE PART I ON THE BACK OF THIS FORM FOR FURTHER STIPULATIONS, WARNINGS AND INFORMATION CONCERNING THIS ACKNOWLEDGMENT WHICH ARE HEREBY INCORPORATED BY REFERENCE.*

**II. PETITION **22**  FOR DEFERRED PAYMENT**

****23**  FOR INSTALLMENT PAYMENTS**

****24**  DEFERRED FOR COMMUNITY SERVICE** (for fines and costs only)

**25**  I, the undersigned, cannot pay the \$ ..... **26** ..... fines, costs, forfeiture, restitution and/or penalty imposed on me in a single payment at this time. Therefore, I petition the Court to allow me to pay the fines, costs, forfeiture, restitution and/or penalty plus any additional court-appointed attorney fee, if applicable,

**27**  in installment payments  in a deferred payment in full  by community service work (for fines and costs only).

*SEE PART II ON THE BACK OF THIS FORM FOR FURTHER STIPULATIONS, WARNINGS AND INFORMATION CONCERNING THIS ACKNOWLEDGMENT WHICH ARE HEREBY INCORPORATED BY REFERENCE.*

..... **28** .....  
DATE

..... **29** .....  
DEFENDANT/PETITIONER

..... **30** .....  
DEFENDANT/PETITIONER TELEPHONE NUMBER

..... **31** .....  
EMPLOYER NAME

..... **32** .....  
DEFENDANT/PETITIONER MONTHLY INCOME

..... **33** .....  
EMPLOYER ADDRESS

It is ordered that the petitioner

- 34**  make ..... installment payments of \$ ..... per ..... , beginning ..... ; or
- make a deferred payment in full on or before ..... DATE
- complete community service (fines and costs only) on or before ..... DATE

..... **35** .....  
CURRENT DATE

..... **36** .....  
 CLERK  JUDGE

## Data Elements

- |   |  |
|---|--|
| 1. Court case number.   | 19. Date on which the form is signed by defendant.   |
| 2. Insert court date.   | 20. Signature of defendant.  |
| 3. Court jurisdiction. Check applicable box for type of court.  | 21. Signature of witness.  |
| 4. Address of court.  | 22. Check if defendant asks for deferred payment of fines, costs, forfeiture, restitution and/or penalty.  |
| 5. Name of adult or juvenile whose license is suspended or who is petitioning.  | 23. Check if defendant asks to pay fines, costs, forfeiture, restitution and/or penalty in installments.   |
| 6. Defendant's driver's license number.   | 24. Check if defendant will perform community service in lieu of payment of fines and costs. Community service can only be used to offset fines and costs. |
| 7. Defendant's social security number.  | 25. Check if the defendant can not pay the total amount of fines, costs, forfeiture, restitution and/or penalty imposed.                                   |
| 8. Residence address of defendant.  | 26. Enter total amount of fines, costs, forfeiture, restitution and/or penalty imposed.  |
| 9. Mailing address if different from residence address.   | 27. Check appropriate box.   |
| 10. Check box and insert appropriate time period and effective date.  | 28. Date on which the petition is signed by defendant.   |
| 11. Check appropriate box and enter name of court if necessary.   | 29. Signature of defendant.  |
| 12. Check if appropriate.   | 30. Telephone number of defendant.   |
| 13. Check appropriate box if defendant has been determined to be a habitual offender by either DMV or a court. Enter the name of the court if applicable.                                     | 31. Name of defendant's employer.  |
| 14. Check this box if suspended for failure to pay fines, costs, forfeiture, restitution and/or penalty and then check applicable box for effective date. Enter effective date of suspension. | 32. Monthly income of defendant.   |
| 15. Enter dollar amount of fines, costs, forfeiture, restitution and/or penalty.  | 33. Address of defendant's employer.   |
| 16. Check box if suspended for failure to pay Alcohol Safety Action Program fee. Enter effective date of suspension.  | 34. Check appropriate box and enter amount, if appropriate, and date.  |
| 17. Enter dollar amount of the Alcohol Safety Action Program fee that must be paid.   | 35. Date of signature of person approving.   |
| 18. Check appropriate box to show whether or not the driver's license was physically given to and retained by the clerk or judge.   | 36. Signature of person approving the deferred payment, installment agreement or payment through community service. Check the applicable title box.        |

## PART I

If my driver's license has been suspended for failure to pay fines, costs, forfeiture, restitution, and/or penalty, I understand that I can avoid this suspension going into effect only if the court actually receives payment in full of such fines, costs, forfeiture, restitution and/or penalty by the effective date of this suspension and that I assume all risks in sending payment by mail. If payment in full is not received by the Court within 30 days of sentencing, the suspension goes into effect and my license must be surrendered to the Court by that date.

I understand that if I provide for payment of a fine or other monies due by a method other than cash and my payment fails, the clerk will send me a written notice of my failure of payment. A penalty of \$50.00 may be charged if the method of payment fails.

I further understand that, if I am convicted of driving while my driver's license is suspended or revoked, I may be fined, sentenced to jail, or both.

I understand that upon suspension or revocation of my license, I may not operate a motor vehicle in the Commonwealth of Virginia until:

- (1) All periods of suspension imposed by any Court or the Department of Motor Vehicles have expired, AND
- (2) I have paid all unpaid fines, costs, forfeiture, restitution, and/or penalty (if any) and the period of suspension (if any) has expired, AND
- (3) The Department of Motor Vehicles reinstates my license (if suspended) or issues a new license (if revoked) after:
  - (a) I have paid the reinstatement fee (if any) to the Department of Motor Vehicles, AND
  - (b) I have delivered a completed copy of the Driver's License Reinstatement Form, if my license was suspended for failure to pay fines, costs, forfeiture, restitution, penalty, and/or ASAP fee. I understand that I must obtain this form from the clerk's office of this Court or the Court where the case papers are filed, AND
  - (c) I have met all other administrative requirements of the Department of Motor Vehicles.

## PART II

I understand that:

- (1) the Court will assess a one-time \$10.00 fee to cover the costs of the installment, deferred payment or community service agreement;
- (2) as a condition of this agreement, I must promptly inform the Court of any change of my mailing address during the term of the agreement;
- (3) if the fines, costs, forfeiture, restitution, and/or penalty are not paid in full by the date ordered, that the Court shall proceed according to the provisions of Va. Code § 19.2-358, which state that a show cause summons or capias for my arrest may be issued;
- (4) the amount(s) listed in this agreement may be administratively amended by the Clerk of this Court in the event additional costs should be assessed and if additional costs are assessed, that the Clerk will forthwith issue a notice to me of the total amount due by first class mail to my address of record;
- (5) the Court or Clerk thereof may adjust the final payment date administratively, without further notice, for installment payment agreements, if I fail to make a scheduled payment or for deferred payments, if I fail to pay in full by the date ordered, for the purposes of referring the account for action pursuant to Va. Code § 19.2-358;
- (6) if the Court has ordered deferred or installment payments or community service, I must make all required payments or perform all community service on time and if I fail to make a scheduled payment or perform the ordered community service, my driver's license shall immediately be suspended forthwith pursuant to Va. Code § 46.2-395; and
- (7) upon notification by a court that my license has been suspended pursuant to Va. Code § 46.2-395, that the Commissioner of the Department of Motor Vehicles shall also suspend all of the registration certificates or license plates registered solely in my name and thereafter shall not issue any registration or license plates for any other vehicle that I seek to register solely in my name.

I further understand that if the court does not receive payments as ordered, my case will be referred for collection enforcement action under §§ 19.2-349, 19.2-353.5, 19.2-358, 46.2-395, or 58.1-520 through 58.1-534 of the Code of Virginia. If my case is referred for collection enforcement action under § 19.2-349, the amount that I owe and that can be collected will be increased to reflect the additional costs associated with collection action. If any part of the amount remains unpaid, pursuant to § 19.2-358, I may be subject to a jail sentence of up to 60 days or an additional fine of up to \$500.00.

**Using This Form**

1. Copies
  - a. Original – to court.
  - b. First copy – to defendant.
2. Prepared by clerk.
3. Attachments – none.
4. Preparation details
  - a. This form is designed to be mailed to the accused in a “window” envelope; it may also be mailed in a regular envelope.
  - b. This form is designed to obtain payment when a check or credit card previously tendered as payment to the court for a traffic fine and costs is returned or dishonored by the bank.

NOTICE OF DISHONORED CHECK OR  
CREDIT CARD CHARGE

Case No. ..... **1** .....

Notice Date: ..... **2** .....

Trial Date: ..... **3** .....

..... **4** .....  General District Court  Circuit Court  
CITY OR COUNTY  Juvenile and Domestic Relations District Court

..... **5** .....  
STREET ADDRESS OF COURT  
.....

Date of  Check  Charge: ..... **6** .....

Amount of Check/Charge: \$ ..... **7** .....

Penalty: \$ ..... **8** .....

Total Owed: \$ ..... **9** .....

Suspend Date: ..... **10** ..... (date on which driver's license will be  
suspended by DMV)

A check given by you, or on your behalf, to this court has been returned unpaid by the financial institution on which it was drawn, or notice has been received from the credit card issuer that payment will not be made on a credit card charge given by you to this court. If the Total Owed indicated above is not paid by cash, cashier's check, money order or certified check within ten (10) days of the date of this Notice, your privilege to drive in the Commonwealth of Virginia will be suspended and the proper licensing agency notified.

**RETURN THIS FORM WITH YOUR PAYMENT.**  
**(Personal checks will not be accepted.)**

**Data Elements**

1. Court case number.
2. Date that this notice is mailed.
3. Trial date.
4. Court name. Check applicable type of court.
5. Address of court.
6. The date that the clerk was written or charge was made.
7. Total amount of the check or charge.
8. Code Section 19.2-353.3 authorizes the imposition of a penalty fee of \$20 or 10% of the total amount of the check (whichever amount is greater) if the check is returned unpaid by the bank. The imposition of this penalty fee is optional with each court. If none, insert "none" or "0.00."
9. This figure is the sum of "Amount of Check/Charge" and "Penalty" (if any).
10. The date of driver's license suspension by DMV.



**Using This Form**

1. Copies
  - a. Original – to court.
  - b. First copy – to accused.
2. Prepared by clerk or judge.
3. Attachments (to original copy ONLY) – Accused’s copy of UNIFORM TRAFFIC SUMMONS if taken by a clerk, if the copy is available.
4. Preparation details – the clerk or judge who completes this form should obtain the information for certain data elements from the sources listed in the applicable data element.

Case No. **1** .....

**COMPLIANCE WITH LAW CERTIFICATE**

COMMONWEALTH OF VIRGINIA VA. CODE §§ 46.2-104, 46.2-1158; 46.2-1158.02

..... **2** .....  General District Court  
CITY OR COUNTY  Juvenile and Domestic Relations District Court

..... **3** .....  
ACCUSED

**4**  This is to certify that the above-named accused or juvenile appeared before the undersigned and produced a valid driver’s license, learner’s permit, temporary driver’s permit or registration card. The driver’s license, learner’s permit, temporary driver’s permit or registration card was examined and determined to be duly issued prior to the date of the offense, and all applicable court costs have been paid. The charge of not having a driver’s license, learner’s permit, temporary driver’s permit or registration card in possession is hereby designated as complied with law pursuant to Virginia Code § 46.2-104.

DL/ Registration No. .... **5** ..... Date Issued ..... **6** .....  
Trial Date ..... **7** ..... Date of Expiration ..... **8** .....  
Summons No. .... **9** ..... Date Issued ..... **10** .....

**11**  This is to certify that the above-named accused or juvenile appeared before the undersigned and produced proof of the correction of vehicle or safety equipment defects, or proof of compliance of inspection pursuant to Virginia Code § 46.2-1158, and all applicable court costs have been paid. This matter is hereby designated as complied with law pursuant to Virginia Code § 46.2-1158.02.

..... **12** .....  
DATE  
..... **13** .....  
[ ] CLERK [ ] JUDGE

ORIGINAL – To Court  
COPY – To Defendant

**Data Elements**

1. Court case number (inserted by clerk).
2. Jurisdiction of court. Check the type of court in which the case is scheduled to be heard.
3. Name of accused. Verify that the name on the Uniform Traffic Summons matches the name on driver's license, learner's permit or temporary driver's permit if charged with driving without a driver's license, learner's permit or temporary driver's permit.
4. Check this box if applicable.
5. The license number on operator's driver's license, the permit number on operator's learner's permit or temporary driver's permit, or the "title number" on the registration card (if charged with driving without a registration card). Verify that the "vehicle license number" on the registration card matches the "vehicle license number" on the Uniform Traffic Summons.
6. Date on which operator's driver's license, learner's permit, temporary driver's permit, or registration card was issued.
7. Trial date as shown on Uniform Traffic Summons.
8. Expiration date as shown on operator's driver's license, learner's permit, temporary driver's permit or registration card.
9. Pre-printed control number on Uniform Traffic Summons (if such a number is pre-printed on Summons).
10. Date on which Uniform Traffic Summons was issued.
11. Check this box if applicable.
12. Date on which this Certificate was signed.
13. Signature of person completing this form. Check the appropriate box.

**Using This Form**

## 1. Copies

- a. Original – to defendant charged with a prepayable traffic infraction.
- b. Prepared by arresting officer in part, remainder prepared by defendant.
- c. Attachments – UNIFORM TRAFFIC SUMMONS.

## 2. Preparation details

- a. This form is designed to be handed to the defendant by the arresting officer along with the defendant's copy of the VIRGINIA UNIFORM SUMMONS. The local law enforcement departments obtain this form from the clerk's office.
- b. The arresting Officer completes Data Elements Nos. 1 and 3 on the front, if applicable. The remainder is prepared by the defendant.
- c. If the defendant was involved in an accident and would like to plead not guilty, the defendant should be instructed by the arresting Officer to complete Data Element Nos. 6 through 11 and send the form to the clerk's office within 7 days of the issuance of the summons. This will provide the court with adequate time to summons any witnesses. If this form is not received with the applicable box checked, the witnesses should not be summonsed.
- d. The reverse of this form is to be completed *only* when the defendant chooses to pay his or her fines and court costs using a credit card or debit card. If the defendant chooses to pay his or her fines and court costs by using a credit or debit card, he or she will be charged a 4% convenience fee.

## VIRGINIA PREPAYABLE OFFENSES INFORMATION SHEET

You have been given a summons accusing you of violating state or local traffic laws. If you wish to plead guilty, waive your right to trial and pay the applicable prepayable fine(s) and fee(s) prior to trial (thereby avoiding having to appear in court), you must do all of the following:

1. Read the NOTICE on the back side of your summons.
2. Read the description of your alleged violation, which follows "Describe charge:" on your summons.
3. Examine the "Brief Description(s)" portion of the Table on the right side of this form for description(s) that matches or very closely matches the description(s) on your summons.
4. a. If your violation is described in the Table, **calculate the total fine(s) and fees** by adding all applicable fines, inserting the total in the total fines blank and then adding the applicable fees to determine the total prepayment due. You must also follow all the instructions on the summons in PRETRIAL WAIVER AND PREPAYMENT INSTRUCTIONS.
- b. If your violation is not described in the Table, call the telephone number listed on your summons and follow all of the instructions on the summons in PRETRIAL WAIVER AND PREPAYMENT INSTRUCTIONS.
5. YOU MAY NOT PREPAY if the charge is for reckless driving.
6. If you prepay more than one violation arising out of the same incident, add only one \$ 51.00 processing fee plus any other fees shown at the bottom right side of the form.
7. To provide for timely delivery by mail, payment should be mailed at least 7 days before your court date. Prepayment is effective only on receipt by the court, not on the date that you mail it. An additional fee will be added if payment is received after the court date. **Make checks payable to the District Court.**
8. General district courts accept credit or debit card payments via the Internet. Online payments are accepted until 3:30 p.m. (eastern time) on the last business day before your court date. **Go to: [www.courts.state.va.us](http://www.courts.state.va.us). If you pay by credit or debit card, you will be charged a 4% convenience fee.**

The Uniform Fine Schedule does not restrict the fine a judge may impose for an offense listed here or in the Uniform Fine Schedule in Rule 3B:2 in any case for which there is a court hearing.

**If you were involved in an accident** and desire to plead NOT GUILTY and have your case heard on the date set, please notify the court by checking the not guilty box below and returning this form to the court within 7 calendar days from the date the summons was issued. If this notice is not received by the court and the officer needs witnesses for the trial, the case may have to be continued from the original court date. You are still required to appear on the original court date whether you send this form or not unless you have received official notice from the court that the case has been continued to a future date or unless you decide to plead guilty and prepay the offense. Failure to appear may result in your being tried in your absence.

**6**  I was involved in an accident and want to plead NOT GUILTY.

<b>7</b> NAME (PLEASE PRINT)	<b>8</b> TRIAL DATE
<b>9</b> NAME OF ATTORNEY, IF RETAINED	<b>10</b> DRIVER'S LICENSE NUMBER
	<b>11</b> SUMMONS NUMBER

### FINES FOR CERTAIN PREPAYABLE VIOLATIONS

Brief Description	Fine
<input type="checkbox"/> Child restraint/safety belt violation (under 18 years; first offense - <b>pay fine only</b> )	\$ 50.00
<input type="checkbox"/> Failure to use seat belt ( <b>pay fine only</b> )	25.00
<input type="checkbox"/> Disabled parking violation	150.00
<input type="checkbox"/> Driving wrong way on one-way street	30.00
<input type="checkbox"/> Earphones while driving	25.00
<input type="checkbox"/> Equipment violation (each charge)	30.00
<input type="checkbox"/> Expired rejection sticker	50.00
<input type="checkbox"/> Failure to dim headlights while moving	30.00
<input type="checkbox"/> Failure to display license plates	25.00
<input type="checkbox"/> Failure to drive on right side of highway	30.00
<input type="checkbox"/> Failure to give proper signal	30.00
<input type="checkbox"/> Failure to have vehicle inspected	30.00
<input type="checkbox"/> Failure to correct defects	50.00
<input type="checkbox"/> Failure to obey highway sign	30.00
<input type="checkbox"/> Failure to obey traffic lights	100.00
<input type="checkbox"/> Evasion of a traffic control device	50.00
<input type="checkbox"/> Failure to obtain registration	25.00
<input type="checkbox"/> Failure to secure load	30.00
<input type="checkbox"/> Failure to yield right of way	30.00
<input type="checkbox"/> Following too closely	30.00
<input type="checkbox"/> Illegal radar detector	40.00
<input type="checkbox"/> Impeding flow of traffic	30.00
<input type="checkbox"/> Improper lane change	30.00
<input type="checkbox"/> Improper passing	30.00
<input type="checkbox"/> Improper U-turn	30.00
<input type="checkbox"/> Stop sign	30.00
<input type="checkbox"/> Speeding (except as provided below)	6.00 per MPH over speed limit
<input type="checkbox"/> Speeding in highway work zone § 46.2-878.1, or school crossing zone § 46.2-873	7.00 per MPH over speed limit
<input type="checkbox"/> Speeding in enhanced residence zone, § 46.2-878.2	200.00 plus 8.00 per MPH over speed limit
<input type="checkbox"/> Highway Safety Corridor moving violation (double the prepayable fine) § 46.2-947	
	\$ <u>  <b>2</b>  </u> TOTAL FINES
	\$ <u>  <b>51.00</b>  </u> PLUS PROCESSING FEE
Personal checks and credit or debit cards accepted. <i>See reverse.</i>	\$ <u>  <b>3</b>  </u> LOCAL FEES (per charge)
	\$ <u>  <b>4</b>  </u> TOTAL PREPAYMENT Payable in U.S. Dollars only

**5**

**Data Elements, front**

1. Check the applicable block if one applies.
2. Insert the appropriate fine.
3. Insert additional costs/fees, if any.
4. Insert total amount to be prepaid.
5. Courts meeting the overprinting criteria in the PURCHASING MANUAL may have local information (such as district court's name and telephone numbers) added. If the court meets overprinting requirements, they may also have the reverse of this form overprinted.
6. If the defendant was involved in an accident and intends to plead not guilty, he or she should check this box. The defendant should not complete Data Element Nos. 1 through 4.
7. If the defendant checks the box in Data Element No. 6, the defendant should insert name as it appears on the Uniform Summons.
8. If the defendant checks the box in Data Element No. 6, the defendant should insert the trial date indicated on the Uniform Summons.
9. If the defendant checks the box in Data Element No. 6, the defendant should insert the name of his or her attorney, if one has been retained.
10. If the defendant checks the box in Data Element No. 6, the defendant should insert his or her driver's license number.
11. If the defendant checks the box in Data Element No. 6, the defendant should insert his or her summons number indicated on the Uniform Summons.

CREDIT/DEBIT CARD PAYMENT: COMPLETE THIS FORM AND MAIL TO COURT LISTED ON FRONT OF THIS FORM

TYPE OF CREDIT/DEBIT CARDS ACCEPTED BY THE COURT: 1  
(IF THE LINE ABOVE IS BLANK, PLEASE CONTACT THE COURT)

**General district courts accept credit or debit card payments via the Internet. Go to: [www.courts.state.va.us](http://www.courts.state.va.us)**

### CREDIT/DEBIT CARD AUTHORIZATION

The offender elects to pay his/her fines and costs using the following credit or debit card:

Type of credit/debit card: 2  
Name as appears on card: 3  
Credit/debit card number: 4 Exp. date (mm/yy) 5  
Total Amount\*: 6 Trial Date: 7

**\*You will also be charged a 4% convenience fee.**

The offender and cardholder understand that in order for this payment to be accepted, the cardholder must possess the valid credit or debit card recorded above. The offender and cardholder have accurately recorded the correct card number and understand that:

- The provision of incomplete or inaccurate data by the offender and cardholder, or the failure to sign in the space below, may result in delays in processing.  
· If an error has been made in calculating the amount of fines and costs, the clerk will correct the error and charge the appropriate amount to the credit or debit card.
- If delays occur, and if the offender does not appear on the court date or pay the fines and costs prior to the court date, the court will proceed to try the offender in his or her absence and, upon conviction the judge may impose a fine that is different from the amounts shown on the front of this form. Also, pursuant to Virginia Code Section 16.1-69.48:1, an additional penalty will be assessed.
- Pursuant to Virginia Code Section 46.2-395, the court shall proceed to suspend the offender's driver's license/driving privilege until said fines and costs are paid in full.
- If the credit or debit card charge is not honored, a penalty will be charged.

8  
SIGNATURE OF OFFENDER DATE

9  
PRINTED NAME OF OFFENDER, AS SHOWN ON TRAFFIC SUMMONS

10  
SIGNATURE OF CARDHOLDER (IF CARDHOLDER IS NOT OFFENDER) DATE

Daytime Phone No. of offender: 11

Please attach your copy of the Uniform Traffic Summons to this form.

**Data Elements, reverse**

1. Credit or debit cards accepted by specific court.
2. Indicate the type of card used for the transaction (MasterCard, Visa, etc.).
3. Provide the name of the person whose credit or debit card is being used to pay the fines and costs.
4. Indicate the credit or debit card number of the card to be used.
5. Indicate the expiration date (month and year).
6. Indicate the total amount due which is determined by completing the front of the form. (The defendant will be charged a 4% convenience fee.)
7. Print the date of trial (found on the VIRGINIA UNIFORM SUMMONS).
8. Signature of the defendant (defendant's failure to sign may result in processing delays) and date signed.
9. Print the name of the defendant as shown on the SUMMONS.
10. Signature of the cardholder if the cardholder is not the defendant and the date the form was completed.
11. Indicate the daytime telephone number of the defendant.



**Using This Form**

1. Copies
  - a. Original – to court.
  - b. Mailer – to defendant.
2. Prepared by clerk. If defendant sends payment by mail using a credit or debit card, credit or debit card information prepared by defendant. If defendant pays by credit or debit card in a district court, defendant will be charged a convenience fee of 4%. If defendant pays by credit or debit card in a circuit court, defendant will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.
3. Attachments – none.
4. The ACCOUNTING MANUAL may be consulted for further details on the collection of unpaid fines and costs.



«court\_name»  
 «street\_address» } 1  
 «city\_state\_zip» }  
 «court\_phone» 2

«defendant\_name» 3  
 «defendant\_street\_address» }  
 «defendant\_city\_state\_zip» } 4

### NOTICE TO PAY

NOTICE DATE «notice_date» <b>5</b>	TRIAL/CONVICTION DATE «trialconviction_date» <b>6</b>	CASE NUMBER «case_number» <b>7</b>	TOTAL NOW DUE «total_now_due» <b>8</b>
--	---	--	--

**YOU OWE THE AMOUNT SHOWN ABOVE AS ORDERED BY THIS COURT.**

**TO THE RECIPIENT** Our records show that you owe this court the **TOTAL NOW DUE** shown above.

1. Payment is due NOW.
2. Payment may be made by check, money order, credit card, or debit card. Make all money orders and checks payable to this court in U.S. funds. Do not send cash by mail. Write the case number on your money order or check.
3. If you believe that this information is incorrect, you should contact the clerk's office of this court IMMEDIATELY to verify the accuracy of this information.
4. To pay by credit or debit card by mail, complete the information on the return portion below.
5. **If you pay by credit or debit card in a district court, you will be charged a convenience fee of 4%. If you pay by credit or debit card in a circuit court, you will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.**
6. If your case is referred for collection enforcement action under § 19.2-349, the amount owed and collected will be increased to reflect the additional costs associated with collection action.

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Return this portion with your payment. Receipt sent only if payment accompanied by self-addressed, stamped envelope.

NOTICE DATE «notice_date» <b>5</b>	TRIAL/CONVICTION DATE «trialconviction_date» <b>6</b>	TOTAL NOW DUE «total_now_due» <b>8</b>
--	---	--

<<\* CREDIT/DEBIT CARDS ACCEPTED BY THIS COURT: \*>>  
 <<\* CREDIT/DEBIT CARDS ARE NOT ACCEPTED BY THIS COURT \*>>

«court\_name»  
 «street\_address» } 1  
 «city\_state\_zip» }  
 «case\_number» 7

NAME OF CARDHOLDER <b>9</b>	
CREDIT/DEBIT CARD TYPE <b>10</b>	TOTAL AMOUNT OF PAYMENT \$ <b>11</b>
CREDIT/DEBIT CARD NUMBER <b>12</b>	
EXPIRATION DATE (mm/yy) <b>13</b>	DAYTIME TELEPHONE NUMBER <b>14</b>
<b>15</b> _____ SIGNATURE	

YOU MAY PAY BY PERSONAL CHECK.

**VIRGINIA LAW REQUIRES THAT PROCESSING FEES AND COSTS BE IMPOSED ON ALL FINDINGS OF GUILT, PREPAYMENTS AND DEFERRALS OF FINDINGS OF GUILT, EVEN IF YOU FAIL TO APPEAR AT TRIAL OR WAIVE YOUR RIGHT TO APPEAR AT TRIAL.**

**Data Elements**

1. Enter court's name and address.
2. Enter court's telephone number.
3. Enter defendant's name.
4. Enter defendant's complete mailing address.
5. Enter the date on which the notice is prepared and mailed.
6. Enter the date on which the defendant was originally tried for this offense.
7. Court case number.
8. Total amount of fines/costs that are outstanding.
9. Name of card holder as it appears on credit or debit card. If defendant pays by credit or debit card in a district court, defendant's credit card will be charged a convenience fee of 4%. If defendant pays by credit or debit card in a circuit court, defendant's credit or debit card will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.
10. Enter card type, *e.g.*, American Express, MasterCard, Visa. Court may use space to indicate credit or debit card types accepted or "check only."
11. Enter total amount of payment.
12. Enter credit or debit card number as it appears on credit or debit card.
13. Enter expiration date (month and year in numeric format).
14. Enter daytime telephone number of credit or debit card holder who is identified in Data Element No. 10.
15. Signature of credit or debit card holder.

**Using This Form**

1. Copies
  - a. Original – to court.
  - b. Mailer – to defendant.
2. Prepared by clerk. If defendant sends payment by mail using a credit or debit card, credit or debit card information prepared by defendant. If defendant pays by credit or debit card in a district court, defendant will be charged a convenience fee of 4%. If defendant pays by credit or debit card in a circuit court, defendant will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.
3. Attachments – none.
4. The ACCOUNTING MANUAL may be consulted for further details on the collection of unpaid fines and costs.

**INSTRUCTIONS:**

1. Be sure payment is enclosed. Do NOT send cash.
2. SIGN and WRITE THE CASE NUMBER on your money order or check.
3. For credit or debit card payments by mail, see reverse.
4. Return lower section of this form in return envelope provided.

DETACH THIS STUB BEFORE PLACING LOWER SECTION IN RETURN ENVELOPE WITH PAYMENT.

NOTICE DATE                  TRIAL/CONVICTION DATE                  CASE NUMBER

**1**                                  **2**                                  **3**

**NOTICE TO PAY**

YOU OWE THE AMOUNT SHOWN AT RIGHT AS ORDERED BY THIS COURT.

TOTAL NOW DUE	DATE
<b>4</b>	<b>5</b>

\_\_\_\_\_  
|  
|

F  
R  
O  
M      **6**

\_\_\_\_\_  
|  
|

T  
O      **7**

\_\_\_\_\_  
|  
|

**READ BOTH SIDES OF THIS NOTICE.**

CREDIT/DEBIT CARD TYPES ACCEPTED:

**YOU MAY PAY BY PERSONAL CHECK.**  
Return this form with your payment. See reverse side for payment information. Receipt sent only if payment accompanied by self-addressed, stamped envelope.

**Data Elements, *page one***

1. Enter the date on which the notice is prepared and mailed.
2. Enter the date on which the defendant was originally tried for this offense.
3. Court case number.
4. Total amount of fines/costs that are outstanding.
5. Enter the date that the past due payment was originally due.
6. Enter the court's name and address.
7. Enter defendant's name and complete address.
8. Enter all credit or debit card types accepted for payment, if applicable.

**TO THE RECIPIENT** Our records show that you owe this court the **TOTAL NOW DUE** as shown on the front side.

**CREDIT/DEBIT CARDS ARE NOT ACCEPTED BY ALL CIRCUIT COURTS.**

Please consult the front of this form to determine what, if any, cards are accepted by the court.

CREDIT/DEBIT CARD TYPE	TOTAL AMOUNT \$
CREDIT/DEBIT CARD NUMBER	<b>1</b>
EXPIRATION DATE	
DAYTIME TELEPHONE NUMBER	
SIGNATURE	

1. Payment is due NOW.
2. Payment may be made by check, money order, credit card, or debit card. Make all money orders and checks payable to this court in U.S. Funds. Do not send cash by mail.
3. If you believe that this information is incorrect, you should contact the clerk's office of this court IMMEDIATELY to verify the accuracy of this information.
4. To pay by credit or debit card by mail, complete the information at right.
5. **If you pay by credit or debit card in a district court, you will be charged a convenience fee of 4%. If you pay by credit or debit card in a circuit court, you will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.**
6. If your case is referred for collection enforcement action under § 19.2-349, the amount owed and collected will be increased to reflect the additional costs associated with collection action.

**VIRGINIA LAW REQUIRES THAT PROCESSING FEES AND COSTS BE IMPOSED ON ALL FINDINGS OF GUILT, PREPAYMENTS AND DEFERRALS OF FINDINGS OF GUILT, EVEN IF YOU FAIL TO APPEAR AT TRIAL OR WAIVE YOUR RIGHT TO APPEAR AT TRIAL.**

**Data Elements, *page two***

1. Information to be completed by the defendant when using a credit or debit card and sending payment by mail. If defendant pays by credit or debit card in a district court, defendant will be charged a convenience fee of 4%. If defendant pays by credit or debit card in a circuit court, defendant will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.



**NOTICE TO PAY AND OF  
SUSPENSION FOR FAILURE TO PAY  
(Letter Format)**

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**Using This Form**

1. Copies
  - a. Original – to court.
  - b. Mailer – to defendant.
2. Prepared by clerk. If defendant sends payment by mail using a credit or debit card, credit or debit card information prepared by defendant. If defendant pays by credit or debit card in a district court, defendant's credit or debit card will be charged a convenience fee of 4%. If defendant pays by credit or debit card in a circuit court, the defendant's credit or debit card will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.
3. The Accounting MANUAL may be consulted for further details on the collection of unpaid fines and costs.

«court\_name» 1  
 «street\_address»  
 «city\_state\_zip» 2  
 «court\_phone»



«defendant\_name» 3  
 «defendant\_street\_address»  
 «defendant\_city\_state\_zip» 4

NOTICE TO PAY AND OF SUSPENSION FOR FAILURE TO PAY

<b>5</b> TOTAL NOW DUE «total_now_due»	<b>YOUR DRIVER'S LICENSE IS SUSPENDED EFFECTIVE ON THE SUSPENSION DATE IF YOU FAIL TO PAY. TO AVOID SUSPENSION, PAYMENT IN FULL MUST BE RECEIVED BY THE COURT PRIOR TO THE SUSPENSION DATE.</b>
<b>6</b> SUSPENSION DATE «suspension_date»	

**7** NOTICE DATE «notice\_date»    **8** TRIAL/CONVICTION DATE «trialconviction\_date»    **9** CASE NUMBER «case\_number»

**YOU OWE ONE OR MORE OF THE FOLLOWING FOR A CONVICTION IN THIS COURT: FINE, COSTS, FORFEITURE, RESTITUTION, AND/OR PENALTY.**

THIS NOTICE APPLIES ONLY TO SUSPENSION FOR FAILURE TO PAY FINES, COSTS, FORFEITURE, RESTITUTION, AND/OR PENALTY WITH REGARD TO THE CASE SPECIFIED AND DOES NOT REFLECT ANY OTHER SUSPENSION.

**TO THE RECIPIENT** Our records show that you owe this court the **TOTAL NOW DUE** shown above.

1. Payment is due NOW.
2. To avoid additional penalties, the court must actually **RECEIVE** your payment prior to the SUSPENSION DATE shown above. Use the mail at your own risk.
3. Payment may be made by check, money order, credit card, or debit card. Make all money orders and checks payable to this court in U.S. funds. Do not send cash by mail. Write the case number on your money order or check.
4. If payment is not RECEIVED prior to the SUSPENSION DATE shown above, then
  - Your privilege to drive is suspended effective on the SUSPENSION DATE and the Virginia Department of Motor Vehicles (DMV) or licensing agency in your state will be notified AND
  - You may be JAILED and fined for failure to pay the TOTAL NOW DUE AND
  - Your case will be referred for further enforcement action as permitted by law. If your case is referred for collection enforcement action under § 19.2-349, the amount owed and collected will be increased to reflect the additional costs associated with collection action.
5. To have your suspended license reinstated, you must provide the Virginia DMV your court receipt for payment in full and pay the Virginia DMV any required reinstatement fee.
6. If you believe that this information is incorrect, you should contact the clerk's office of this court IMMEDIATELY to verify the accuracy of this information.
7. To pay by credit or debit card by mail, complete the information on the return portion below.
8. To pay by credit or debit card via the Internet for cases in general district courts only, go to [www.courts.state.va.us](http://www.courts.state.va.us).
9. **If you pay by credit or debit card in a district court, you will be charged a convenience fee of 4%. If you pay by credit or debit card in a circuit court, you will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.**

Return this portion with your payment. Receipt sent only if payment accompanied by self-addressed, stamped envelope.

NOTICE DATE «notice\_date»    TRIAL/CONVICTION DATE «trialconviction\_date»    TOTAL NOW DUE «total\_now\_due»  
**7**                                    **8**                                    **5**

<< CREDIT/DEBIT CARDS ACCEPTED BY THIS COURT: \* >>  
 << CREDIT/DEBIT CARDS ARE NOT ACCEPTED BY THIS COURT \* >>

«court\_name» 1  
 «street\_address»  
 «city\_state\_zip» 2  
 «case\_number» 9

NAME OF CARDHOLDER <b>10</b>	
CREDIT/DEBIT CARD TYPE <b>11</b>	TOTAL AMOUNT OF PAYMENT \$ <b>12</b>
CREDIT/DEBIT CARD NUMBER <b>13</b>	
EXPIRATION DATE (mm/yy) <b>14</b>	DAYTIME TELEPHONE NUMBER <b>15</b>
<b>16</b> SIGNATURE	<b>17</b> DATE

YOU MAY PAY BY PERSONAL CHECK.

VIRGINIA LAW REQUIRES THAT PROCESSING FEES AND COSTS BE IMPOSED ON ALL FINDINGS OF GUILT, PREPAYMENTS AND DEFERRALS OF FINDINGS OF GUILT, EVEN IF YOU FAIL TO APPEAR AT TRIAL OR WAIVE YOUR RIGHT TO APPEAR AT TRIAL.

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**Data Elements**

1. Court name.
2. Enter court's address and telephone number.
3. Defendant's name.
4. Defendant's address.
5. Total amount of fines/costs that are outstanding.
6. Date of suspension.
7. Enter the date on which the notice is prepared and mailed.
8. Enter the date on which the defendant was originally tried for this offense.
9. Court case number.
10. Name of cardholder as it appears on credit or debit card. If defendant pays by credit or debit card in a district court, defendant's credit or debit card will be charged a convenience fee of 4%. If defendant pays by credit or debit card in a circuit court, the defendant's credit or debit card will be charged a convenience fee of up to 4% or a flat fee of \$2.00 per transaction.
11. Enter card type, *e.g.*, American Express, Mastercard, Visa. Court may use space to indicate credit or debit card types accepted or "check only."
12. Enter total amount of payment.
13. Enter card number as it appears on credit or debit card.
14. Enter expiration date (month and year in numeric format).
15. Enter daytime telephone number of credit or debit card holder who is identified in Data Element No. 10.
16. Signature of credit or debit cardholder.
17. Enter date the form was completed by the credit or debit cardholder.

### Using This Form

1. Copies - Original--to court.
2. Page one is prepared by magistrate, signed by defendant or magistrate. Page two is prepared by arresting officer, signed by defendant or arresting officer and witness.
3. Attachments
  - a. DC-314, WARRANT OF ARREST (STATE MISDEMEANOR)
  - b. DC-319, SUMMONS
4. Preparation details
  - a. Page one, CERTIFICATE OF REFUSAL – BREATH/BLOOD TEST (WATERCRAFT OR MOTORBOATS), has two parts.
    - One part is a declaration of refusal to take blood or breath tests (either or both tests as requested).
    - The second part is a certificate of *a magistrate* that the person refusing to take the applicable tests also refused or failed to execute the declaration of refusal.
    - If the person refusing to take the blood/breath test is willing to sign the declaration of refusal, then the refusal, Data Elements Nos. 1 through 3, should be completed.
    - The certificate of refusal is executed by the magistrate *only* if the person refusing to take the tests also refuses to execute the declaration of refusal. In such a situation, the magistrate should complete Data Elements Nos. 4 through 8.
  - b. Page two, DECLARATION OF REFUSAL TO PERMIT TAKING OF BREATH AND/OR BLOOD SAMPLE AT A MEDICAL FACILITY, has two parts.
    - One part is a separate declaration of refusal to take blood or breath tests (either or both tests as requested) for boating while intoxicated.
    - The second part is a certificate of *an arresting officer* that the person refusing to take the applicable tests also refused or failed to execute the applicable declaration of refusal.
    - If the person refusing to take the blood/breath test is willing to sign the declaration of refusal, then the refusal, Data Elements Nos. 1 through 3, should be completed.
    - The certificate of refusal is executed by the arresting officer *only* if the person refusing to take the tests also refuses to execute the declaration of refusal. In such a situation, the arresting officer should advise the defendant of the consequences of his refusal to take a blood or breath test in the presence of a witness and complete the applicable data elements.
    - The arresting officer may only take a declaration or complete the certificate when the arresting officer is unable to take the person refusing before a magistrate because of a need for the person to be taken to a medical facility for treatment or evaluation.

**CERTIFICATE OF REFUSAL — BREATH/BLOOD TEST (WATERCRAFT OR MOTORBOATS)**

Commonwealth of Virginia Va. Code § 29.1-738.2

**DECLARATION OF REFUSAL TO PERMIT TAKING OF BREATH AND/OR BLOOD SAMPLE**

The Code of Virginia provides that if you operate a watercraft or motorboat which is underway upon the waters of this Commonwealth and (i) you are arrested for operating a watercraft or motorboat while under the influence of alcohol, intoxicants or drugs or any combination thereof or while you have a blood alcohol concentration of 0.08% or more by weight by volume or 0.08 grams or more per 210 liters of breath, if arrested within three hours of the alleged offense, or (ii) you are under 21 and you are arrested for operating a motorboat or watercraft after having consumed alcohol, you shall be deemed to have agreed, as a condition of such operation, to consent to have a sample of blood or breath or both blood and breath taken for chemical testing to determine the alcohol and/or drug content of your blood. You shall submit to a breath test. However, if the breath test is unavailable or you are physically unable to submit to the breath test, a blood test shall be given. If the arresting officer has reasonable cause to believe that you were operating a watercraft or motorboat under the influence of drugs or a combination of drugs and alcohol, you may be required to allow the taking of a blood sample for chemical testing to determine the drug content of your blood, even if a breath sample was previously provided. If you refuse to permit the taking of a sample, and your refusal is unreasonable, your refusal constitutes a separate offense and will, upon the conviction of the offense, result in an order for you not to operate a watercraft or motorboat in Virginia for a period of twelve months for the first offense and 24 months for subsequent offenses of refusal within five years of a previous refusal.

**DECLARATION OF REFUSAL**

Having read the above statement and having been advised by the arresting officer and the committing magistrate of the law requiring that I permit the taking of a breath sample and/or a blood sample when required, and of the penalty for unreasonably refusing to permit such sample to be taken, I refuse to permit the taking of the breath sample and/or blood sample and herewith make this declaration of refusal as prescribed by law.

\_\_\_\_\_ **1** \_\_\_\_\_  
PERSON REFUSING  
  
\_\_\_\_\_ **2** \_\_\_\_\_  
WITNESS  
  
\_\_\_\_\_ **3** \_\_\_\_\_  
DATE

**CERTIFICATE OF COMMITTING MAGISTRATE**

*(To be executed by the committing magistrate only if the person before him or her refuses to permit the taking of a breath and/or blood sample and further refuses to execute the declaration of refusal.)*

I, \_\_\_\_\_ **4** \_\_\_\_\_, a magistrate in the City/County of \_\_\_\_\_  
NAME  
\_\_\_\_\_, Virginia, do hereby certify that I advised \_\_\_\_\_ **5** \_\_\_\_\_,  
LOCALITY  
\_\_\_\_\_ **6** \_\_\_\_\_ who has been brought before  
PERSON REFUSING  
me pursuant to Virginia Code § 29.1-738.2 or a similar local ordinance and who has refused to permit the taking of a breath and/or blood sample, that his or her refusal to permit such sample to be taken, if found to be unreasonable, constitutes a separate offense that will result in an order not to operate a motorboat or watercraft if found to have committed the offense.

I do hereby certify that the person refusing named above refused or failed to execute the declaration of refusal inscribed on this document.

\_\_\_\_\_ **7** \_\_\_\_\_  
DATE  
  
\_\_\_\_\_ **8** \_\_\_\_\_  
SIGNATURE OF MAGISTRATE

**Data Elements, *page one***

1. Signature of person refusing to take blood/breath test(s). See Using This Form, 4.a.
2. Signature of witness to the signing of the signature in Data Element No. 1.
3. Date of signing of Data Elements Nos. 1 and 2.
4. Name of magistrate who executes the certificate. See Using This Form, 4.a.
5. City or county where magistrate is sitting at the time of the execution of the certificate.
6. Name of person refusing to take blood/breath test(s) and refusing to execute the applicable declaration of refusal.
7. Date of execution of this certificate.
8. Signature of Magistrate.

DECLARATION OF REFUSAL TO PERMIT TAKING OF BREATH AND/OR BLOOD SAMPLE  
AT A MEDICAL FACILITY  
(WATERCRAFT OR MOTORBOATS)

The Code of Virginia provides that if you operate a watercraft or motorboat which is underway upon the waters of this Commonwealth and (i) you are arrested for operating a watercraft or motorboat while under the influence of alcohol, intoxicants or drugs or any combination thereof or while you have a blood alcohol concentration of 0.08% or more by weight by volume or 0.08 grams or more per 210 liters of breath, if arrested within three hours of the alleged offense, or (ii) you are under 21 and you are arrested for operating a motorboat or watercraft after having consumed alcohol, you shall be deemed to have agreed, as a condition of such operation, to consent to have a sample of blood or breath or both blood and breath taken for chemical testing to determine the alcohol and/or drug content of your blood. You shall submit to a breath test. However, if the breath test is unavailable or you are physically unable to submit to the breath test, a blood test shall be given. If the arresting officer has reasonable cause to believe that you were operating a watercraft or motorboat under the influence of drugs or a combination of drugs and alcohol, you may be required to allow the taking of a blood sample for chemical testing to determine the drug content of your blood, even if a breath sample was previously provided. If you refuse to permit the taking of a sample, and your refusal is unreasonable, your refusal constitutes a separate offense and will, upon the conviction of the offense, result in an order for you not to operate a watercraft or motorboat in Virginia for a period of twelve months for the first offense and 24 months for subsequent offenses of refusal within five years of a previous refusal.

DECLARATION OF REFUSAL

Having read the above statement and having been advised by the arresting officer of the law requiring that I permit the taking of a breath sample and/or a blood sample when required, and of the penalty for unreasonably refusing to permit such sample to be taken, I refuse to permit the taking of the breath sample and/or blood sample and herewith make this declaration of refusal as prescribed by law.

\_\_\_\_\_ **1**  
PERSON REFUSING  
  
\_\_\_\_\_ **2**  
WITNESS  
  
\_\_\_\_\_ **3**  
DATE

CERTIFICATE OF ARRESTING OFFICER

*(To be executed by the arresting officer only if the person before him or her refuses to permit the taking of a breath and/or blood sample and further refuses to execute the declaration of refusal.)*

I, \_\_\_\_\_ **4** \_\_\_\_\_, an arresting officer in the City/County of  
NAME  
\_\_\_\_\_ **5** \_\_\_\_\_, Virginia, do hereby certify that I advised  
LOCALITY  
\_\_\_\_\_ **6** \_\_\_\_\_, who has been arrested pursuant to  
PERSON REFUSING  
Virginia Code §§ 29.1-738, 29.1-738.02 or a similar local ordinance and who has refused to permit the taking of a breath and/or blood sample, that his or her refusal to permit such sample to be taken, if found to be unreasonable, constitutes a separate offense that will result in an order not to operate a motorboat or watercraft if found to have committed the offense.

I was unable to take the person refusing named above before a magistrate because the person refusing was taken to a medical facility for treatment or evaluation.

I do hereby certify that the person refusing named above refused or failed to execute the declaration of refusal inscribed on this document.

\_\_\_\_\_ **7** \_\_\_\_\_  
DATE  
  
\_\_\_\_\_ **8** \_\_\_\_\_  
SIGNATURE OF ARRESTING OFFICER

I observed the arresting officer advise the person refusing whose signature appears above of the law requiring that blood or breath samples be taken and the penalty for refusal.

\_\_\_\_\_ **9** \_\_\_\_\_  
WITNESS  
  
\_\_\_\_\_ **10** \_\_\_\_\_  
DATE

**Data Elements, *page two***

1. Signature of person refusing to take blood/breath test(s).
2. Signature of witness to the signing of the signature in Data Element No. 1.
3. Date of signing of Data Elements Nos. 1 and 2.
4. Name of arresting officer who executes the certificate.
5. City or county where arresting officer is located at the time of the execution of the certificate.
6. Name of person refusing to take blood/breath test(s) and refusing to execute the applicable declaration of refusal.
7. Date of execution of this certificate.
8. Signature of arresting officer.
9. Signature of witness to the arresting officer advising the person of the consequences of the refusal.
10. Date of the witness's signature.



**Using This Form**

1. Copies – Original to court.
2. Prepared by magistrate, signed by defendant or magistrate.
3. Attachments
  - a. Form DC-314, WARRANT OF ARREST (STATE MISDEMEANOR)
  - b. Form DC-319, SUMMONS
4. Preparation details
  - a. This form contains two parts.
    - One part is a declaration of refusal to take blood or breath tests (either or both tests as requested).
    - The second part is a certificate of a magistrate that the person refusing to take the applicable tests also refused or failed to execute the declaration of refusal.
  - b. If the person refusing to take the blood/breath test is willing to sign the declaration of refusal, then the refusal, Data Element Nos. 1 through 3, should be completed.
  - c. The certificate of refusal is executed by the magistrate *only* if the person refusing to take the tests also refuses to execute the declaration of refusal. In such a situation, the magistrate should complete Data Element Nos. 4 through 8.

CERTIFICATE OF REFUSAL – BREATH/BLOOD TEST (COMMERCIAL MOTOR VEHICLE)

Commonwealth of Virginia Va. Code § 46.2-341.26:3

DECLARATION OF REFUSAL TO PERMIT TAKING OF BREATH AND/OR BLOOD SAMPLE

Sections 46.2-341.26:2 and 46.2-341.26:3 of the Code of Virginia provide that if you, whether licensed by Virginia or not, operate a commercial motor vehicle upon a public highway in this Commonwealth and are arrested for operating a commercial motor vehicle while under the influence of alcohol, intoxicants or drugs or a combination thereof or while you have a blood alcohol concentration of 0.04% or more by weight by volume, or while you have any amount of alcohol in your blood, if arrested within two hours of the alleged offense, you shall be deemed to have agreed, as a condition of such operation, to consent to have a sample of breath and/or blood taken for chemical testing to determine the alcohol content of your blood. If the arresting officer has reasonable cause to believe that you were driving under the influence of drugs or a combination of drugs and alcohol, you may be required to allow the taking of a blood sample for chemical testing to determine the drug content of your blood even if a breath sample was previously provided. If you refuse to permit the taking of a sample, and your refusal to do so is unreasonable, your refusal constitutes a separate offense and will result in the issuance of an out-of-service order, and, upon conviction of the offense, in the disqualification of you from operating a commercial motor vehicle for a period of one year for a first offense or for life for a subsequent offense for refusal to submit to a chemical test to determine the alcohol or drug content of your breath or blood or for three years for your refusal if the offense was committed while driving a commercial motor vehicle while transporting hazardous materials. If it is found by a court that you unreasonably refused to consent to a breath test or blood test, that finding may be admitted as evidence in the criminal trial of a driving while under the influence charge for the sole purpose of explaining the absence at trial of a chemical test of such sample. When admitted, this evidence will not be considered as evidence of your guilt.

DECLARATION OF REFUSAL

Having read the above statement and having been advised by the arresting officer and the committing magistrate of the law requiring that I permit the taking of a breath sample and/or a blood sample and of the sanction for unreasonably refusing to permit such sample to be taken, I refuse to permit the taking of the breath sample and/or blood sample and herewith make this declaration of refusal as prescribed by law.

\_\_\_\_\_ **1**  
PERSON REFUSING  
\_\_\_\_\_ **3**  
DATE  
\_\_\_\_\_ **2**  
WITNESS

CERTIFICATE OF COMMITTING MAGISTRATE

(To be executed by the committing magistrate only if the person before him or her refuses to permit the taking of a breath and/or blood sample and further refuses to execute the declaration of refusal.)

I, \_\_\_\_\_ **4** \_\_\_\_\_, a magistrate in the City/County of  
NAME  
\_\_\_\_\_ **5** \_\_\_\_\_, Virginia, do hereby certify that I advised  
LOCALITY  
\_\_\_\_\_ **6** \_\_\_\_\_ who has been brought before me pursuant  
PERSON REFUSING  
to Virginia Code § 46.2-341.26:3 or a similar local ordinance and who has refused to permit the taking of a breath and/or blood sample, that his or her refusal to permit such sample to be taken, if found to be unreasonable, constitutes a separate offense that will result in the issuance of an out-of-service order and disqualification from operating a commercial motor vehicle.

Additionally, the person refusing was advised that a find by a court that he/she unreasonably refused to consent to a breath test or blood test may be admitted as evidence at the criminal trial of a driving while under the influence charge for the sole purpose of explaining the absence at trial of a chemical test of such sample. When admitted, this evidence will not be considered as evidence of his/her guilt.

I do hereby certify that the person refusing named above refused or failed to execute the declaration of refusal inscribed on this document.

\_\_\_\_\_ **7** \_\_\_\_\_  
DATE  
\_\_\_\_\_ **8** \_\_\_\_\_  
SIGNATURE OF MAGISTRATE

**Data Elements**

1. Signature of person refusing to take blood/breath test(s). See Using This Form, 4.b.
2. Signature of witness to the signing of the signature in Data Element No. 1.
3. Date of signing of Data Element No. 1.
4. Name of magistrate who executes the certificate. See Using This Form, 4.c.
5. City or county where magistrate is sitting at the time of the execution of the certificate.
6. Name of person refusing to take blood/breath test(s) and refusing to execute the applicable declaration of refusal.
7. Date of execution of this certificate.
8. Signature of magistrate.

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**Using This Form**

1. Copies - Original--to court.
2. Prepared by arresting officer, signed by arresting officer and acknowledged by magistrate on front and signed by the defendant or arresting officer on reverse.
3. Attachments
  - a. DC-314, WARRANT OF ARREST (STATE MISDEMEANOR)
  - b. DC-319, SUMMONS
4. Preparation details
  - a. The arresting officer is responsible for reading the information about the consequences of refusal to the person arrested. The officer then completes the information and signs the declaration. Upon taking the person before the magistrate, the arresting officer acknowledges before the magistrate that he or she read the form to the person refusing and the magistrate signs the acknowledgment.

DECLARATION AND ACKNOWLEDGEMENT OF REFUSAL –  
BREATH/BLOOD TEST  
(MOTOR VEHICLES GENERALLY)

DECLARATION AND ACKNOWLEDGMENT OF REFUSAL — BREATH/BLOOD TEST  
(MOTOR VEHICLES GENERALLY)

Commonwealth of Virginia Va. Code § 18.2-268.3

INFORMATION ABOUT CONSEQUENCES OF REFUSAL

The Code of Virginia provides that if you, whether licensed by Virginia or not, operate a motor vehicle upon a highway in the Commonwealth and are arrested for a drug or alcohol-related driving offense in violation of §§ 18.2-51.4, 18.2-266, 18.2-266.1 or 18.2-272 (B) or of a similar ordinance if arrested within three hours of the alleged offense, you shall be deemed to have agreed, as a condition of such operation, to consent to have a sample of breath, blood, or both breath and blood taken for chemical testing to determine the alcohol and/or drug content of your blood. You shall submit to a breath test. If the breath test is unavailable or you are physically unable to submit to the breath test, a blood test shall be given. If the arresting officer has reasonable cause to believe that you were driving under the influence of drugs or a combination of drugs and alcohol, you may be required to allow the taking of a blood sample for chemical testing to determine the drug content of your blood, even if a breath sample was previously provided.

If you refuse to permit the taking of a required sample of breath, blood, or both breath and blood, and your refusal is unreasonable, your refusal constitutes a separate offense. A first violation of this section is a civil offense and subsequent violations are criminal offenses.

A finding of a first offense of unreasonable refusal shall result in the revocation of your privilege of operating a motor vehicle upon the highways of the Commonwealth for a period of one year. This suspension period is in addition to the suspension period provided under § 46.2-391.2.

A conviction of unreasonable refusal within 10 years of a prior conviction of driving while intoxicated or unreasonable refusal will result in finding you guilty of a Class 2 misdemeanor, which is punishable by confinement in jail for not more than six months and a fine of not more than \$1,000, either or both, and will also result in the court suspending your privilege to drive for a period of three years.

A conviction of unreasonable refusal within 10 years of any two prior convictions of driving while intoxicated or unreasonable refusal will result in finding you guilty of a Class 1 misdemeanor, which is punishable by confinement in jail for not more than 12 months and a fine of not more than \$2,500, either or both, and will also result in the court suspending your privilege to drive for a period of three years.

If it is found that you unreasonably refused to consent to a breath test or blood test, that finding may be admitted as evidence in a criminal trial for a violation of §§ 18.2-51.4, 18.2-266, 18.2-266.1 or 18.2-272 (B) or similar ordinance for the purpose of explaining the absence at trial of a chemical test of such sample or for the purpose of rebuttal. When admitted in a criminal trial for a violation of §§ 18.2-51.4, 18.2-266, 18.2-266.1 or 18.2-272 (B) or similar ordinance this evidence will not be considered as evidence of your guilt.

DECLARATION AND ACKNOWLEDGMENT OF ARRESTING OFFICER

I, ..... <sup>1</sup>....., an arresting officer in the City/County/Town of  
..... <sup>2</sup>..... NAME

..... <sup>3</sup>....., Virginia, do hereby certify that I have read this form to  
..... <sup>3</sup>....., who has been arrested pursuant to Virginia

Code §§ 18.2-51.4, 18.2-266, 18.2-266.1, or 18.2-272 (B), or a similar ordinance, and who, after having this form read to him has refused to permit the taking of a breath and/or blood sample.

<sup>4</sup> [ ] The person arrested has been convicted of ..... <sup>4</sup>..... violation(s) of §§ 18.2-266, 18.2-268.3, or any offense described in 18.2-270 (E) within the last 10 years.  
..... NUMBER OF CONVICTIONS

<sup>5</sup>  
DATE

<sup>6</sup>  
SIGNATURE OF ARRESTING OFFICER

The arresting officer acknowledged under oath before me that he or she had read this form to the person named above.

<sup>7</sup>  
DATE

<sup>8</sup>  
MAGISTRATE

**Data Elements**

1. Name of arresting officer who executes the declaration.
2. City or county where arresting officer is located at the time of the execution of the declaration.
3. Name of person refusing to take blood/breath test(s).
4. Check the box and indicate the number of convictions, if applicable.
5. Date of execution of this certificate.
6. Signature of arresting officer.
7. Date of acknowledgment by magistrate.
8. Signature of magistrate.

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**Using This Form**

This form is used (1) when a person is found to have violated Virginia Code § 18.2-266.1, illegally consuming alcohol under the age of 21 (a blood alcohol content of .02%-.08%);(2) when a person's license has been suspended as a penalty for reckless driving or aggressive driving; or (3) when a person's license has been suspended when an offense referenced in Va. Code § 46.2-396.1 resulted in the death of a person. This form is prepared by the clerk and signed by the judge. If an error is made, the form must be prepared anew in its entirety. This is a three-page order. The second and third pages to be used with this form is designated as Form DC-261, RESTRICTED LICENSE ORDER. The DC-260 is used to order the forfeiture or suspension of the offender's driver's license. A restricted license may be granted by the court upon conviction during the license forfeiture/suspension period. If a restricted driver's license is ordered, the terms of and conditions of that license are noted in this order. The offender should be told that he or she must carry this order with him or her when driving if a restricted driver's license is granted.

**Form Distribution:**

- Original (Gray\* safety paper) to offender
- First copy (Yellow) to court
- Second copy (White) to DMV. Note: Courts which are automated and interfaced through CMS with DMV are not required to send the paper copy to DMV.
- Third copy (Green) to Program.

A district court form DC-210, ACKNOWLEDGMENT OF SUSPENSION OR REVOCATION OF DRIVER'S LICENSE, should be completed as part of the processing of the DC-260 (unless a restricted license is issued). In addition, the offender's Virginia operator's license should be confiscated and forwarded to DMV.

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\*Please note that the color of the top copy may vary, although referred to as "gray" using printing terminology.

**DRIVER'S LICENSE FORFEITURE/SUSPENSION AND RESTRICTED DRIVING ORDER**

Commonwealth of Virginia Va. Code §§ 18.2-266.1; 46.2-392; 46.2-396.1

Case No: **1** .....

**2** .....  
 CITY/COUNTY

**3** {  Circuit Court  
 General District Court  
 Juvenile and Domestic Relations District Court

**4** .....  
 OFFENDER/PETITIONER

**6** COMPLETE DATA BELOW IF KNOWN

RACE	SEX	BORN			HT.		WGT.	EYES	HAIR
		MO.	DAY	YR.	FT.	IN.			
D.L.# <b>7</b> .....								STATE <b>8</b>	

**5** .....  
 ADDRESS

**9** ..... B.A.C

**10** .....  
 OFFENSE DATE

CITY STATE ZIP

**11** {  Original Order  
 Amended Order

- 12** {
- You have been found guilty of driving after illegally consuming alcohol and disposition of this case is being made pursuant to Va. Code § 18.2-266.1. The Court, as part of its disposition, orders that your driver's license and your privilege to drive be forfeited for a period of:  one year (for offenses committed before July 1, 2010 or on or after July 1, 2011) OR  six months (for offenses committed between July 1, 2010 and June 30, 2011).
  - You have been convicted of  reckless driving  aggressive driving in violation of the Code of Virginia. In this case, your driver's license and the privilege to drive have been ORDERED suspended for a period of ..... and you MAY NOT DRIVE except as allowed by the Restricted License Order.
  - You have been convicted of an offense referenced in Va. Code § 46.2-396.1 causing the death of a person. In this case your driver's license and your privilege to drive have been ORDERED suspended for a period of .....
  - You are ORDERED, on the terms and conditions listed below, to enter the following Program (the Program):  

<b>13</b> .....	<b>14</b> .....
PROGRAM NAME AND ADDRESS	FEE

5.  No restricted license privilege is granted to the Petitioner by this ORDER.
- 15**  A restricted license privilege is granted to the Petitioner for the purposes enumerated on the second and third pages of this Order and subject to the conditions below.

**CONDITIONS OF RESTRICTED LICENSE: This ORDER is entered and the restricted license is to be issued upon the following conditions:**

- This privilege is subject to any other conditions, restrictions, suspensions or revocations imposed by any court of competent jurisdiction or the Virginia Department of Motor Vehicles. If your license is suspended for other reasons, the privileges of this license may be VOID and the Department of Motor Vehicles may refuse to issue you a restricted license.**
  - If ordered to enter a Program, you shall satisfactorily and timely comply with and successfully complete the Program's requirements.
  - You shall immediately notify this Court, the Virginia Department of Motor Vehicles, and the Program of any change of residential address; or any change to any of the information listed in items "a" through "m" on pages two and three of this order.
  - 16** ..... Commencement date of restricted license privilege. If you are ordered to attend a Program, this privilege EXPIRES 15 DAYS from this date unless proof of enrollment in the Program named above is endorsed on the back of page one of this ORDER. In addition, this privilege EXPIRES 60 DAYS from this date if this ORDER is not accompanied by a restricted license issued by the Virginia Department of Motor Vehicles or by your home state license if you are not a Virginia resident.
  - 17** ..... Expiration date of this restricted license Order unless withdrawn or modified by this Court. Upon expiration of this restricted license order, issuance of a driver's license shall be subject to other conditions, restrictions, suspensions or revocations imposed by any Court of competent jurisdiction or the Virginia Department of Motor Vehicles.
  - You shall carry ALL THREE PAGES of this ORDER, and any attachment, at all times while operating a motor vehicle until this restricted license expires.
- 18**  Please see reverse side for other applicable conditions.

**WARNING:** Forging or altering this Order or possessing a forged or altered order is a separate criminal offense punishable by fines and incarceration. Va. Code §§ 18.2-107, 18.2-168, 18.2-169. Driving outside of these restricted privileges constitutes a separate criminal offense.

**NOTE: This is page one of a three-page order.**



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**Data Elements, page one, front**

1. Enter case number.
2. Court jurisdiction.
3. Check the appropriate box.
4. Name of the offender/petitioner.
5. Current complete address of the offender/petitioner.
6. Information describing the offender/petitioner.
7. Driver's license number of the offender/petitioner.
8. State of issuance of the offender's/petitioner's driver's license.
9. Insert blood alcohol content, if applicable.
10. Date of the offense.
11. Check if this is an original or amended order.
12. Check the appropriate box to indicate the offense for which the driver's license and privilege to drive has been suspended and enter the period of suspension if applicable.
13. If the offender/petitioner is ordered to attend a program, check the box and note the name and address of the program the offender/petitioner is ordered to attend. Also include dates and times of meetings (if known at time of issuance).
14. Indicate the fee associated with the program the offender/petitioner is ordered to attend.
15. Check the appropriate box to indicate if a restricted driver's license is being issued.
16. If a restricted driver's license is being issued, enter commencement date of restricted license privilege.
17. If a restricted driver's license is being issued, enter expiration date of restricted license privilege.
18. Check if there are other conditions listed on the reverse side of page one other than the terms listed on pages two and three of the order.

Other applicable conditions:

**1**

.....

.....

.....

.....

.....

This is to certify that the offender described on the front of this Order has enrolled in the Program named in this Order.

**2**

DATE

**3**

TITLE

**4**

SIGNATURE

**Data Elements, reverse (Original)**

1. Describe other applicable conditions other than the terms on the second and third pages of the order.
2. Date of completion of reverse of this form by VASAP staff member.
3. Title of VASAP staff member completing the reverse of this form.
4. Signature of VASAP staff member completing the reverse of this form.

**Using This Form**

1. Copies
  - a. Original (gray\* safety paper) – to defendant.
  - b. First copy (canary) – to court.
  - c. Second copy (white) – to Department of Motor Vehicles (DMV).
  - d. Third copy (green) – to Virginia Alcohol Safety Action Program (VASAP).
2. This form is the second and third pages to district court forms DC-260, DC-265, DC-279, DC-282, DC-359, DC-576 and DC-577. Please see the instructions for the first page of the applicable form for additional guidance on using this form.

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\* Please note that the color of the top copy may vary, although referred to as “gray” using printing terminology.

Name ..... **1**  
LAST, FIRST, MIDDLE

Case No. .... **2**

**RESTRICTED LICENSE ORDER**

**3** The Virginia Department of Motor Vehicles is ORDERED to issue a restricted driver's license to you (if you are otherwise eligible for a license and comply with any additional statutory or administrative requirements for the issuance of a license) for the operation of a motor vehicle ONLY for the purposes checked below:

**4** (a)  yes  no travel to or from your place of employment by the most direct route as described below.

**5** (b)  yes  no travel to or from the Program named on the first page of this Order and such other locations designated in writing by the Program.

**6** (c)  yes  no travel during the hours of employment, IF the operation of a motor vehicle is necessary to the employment described below.

**7**

EMPLOYER NAME AND WORK LOCATION

**8**

(a) HOURS FOR TRAVEL TO AND FROM WORK

**9**

(c) HOURS OF EMPLOYMENT

(d)  yes  no travel to and from school.

**10**

SCHOOL NAME AND LOCATION

AUTHORIZED DATES AND TIMES FOR TRAVEL TO AND FROM SCHOOL

**11**(e)  yes  no travel for health care services for  you  elderly parent

a person residing in your household:

MEDICAL SERVICE PROVIDER NAME AND LOCATION

**12**(f-1)  yes  no you may only operate a motor vehicle that is equipped with a functioning, certified ignition interlock system. See form DC-266, RESTRICTED DRIVER'S LICENSE CONDITIONS – IGNITION INTERLOCK ORDER (attached), the terms of which are incorporated herein by reference.

**13**(f-2)  yes  no travel to and from the facility that installed or monitors the ignition interlock on your vehicle(s).

**14**(g-1)  yes  no travel necessary to transport a minor child under your care to and from school.

SCHOOL NAME AND LOCATION

AUTHORIZED DATES AND TIMES FOR TRAVEL TO AND FROM SCHOOL

**15**(g-2)  yes  no travel necessary to transport a minor child under your care to and from day care.

DAY CARE NAME AND LOCATION

AUTHORIZED DATES AND TIMES FOR TRAVEL TO AND FROM DAY CARE

**16**(g-3)  yes  no travel necessary to transport a minor child under your care to and from facilities housing medical service providers.

MEDICAL SERVICE PROVIDER NAME AND LOCATION

**17**(h)  yes  no travel to and from court ordered visitation with your child(ren).

NAME AND LOCATION OF CHILD(REN)

**18**(i-1)  yes  no travel to and from appointments with probation officer.

PROBATION ENTITY AND LOCATION

**NOTE: This is page two of a three-page order for the following forms: DC-260, DC-265, DC-279, DC-282, DC-359, DC-576, DC-577**

## Data Elements, page two

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>1. Insert the offender's/petitioner's/juvenile's name.</li> <li>2. Insert the case number.</li> <li>3. Check this box and complete Data Elements Nos. 4 through 18 <i>if</i> a restricted driver's license <u>is</u> to be issued.</li> <li>4. If permission to drive <u>to and from work</u> is granted, check "yes" and complete Data Elements Nos. 7 and 8. If such permission is not granted, check "no."</li> <li>5. If permission is granted to drive to and from the Alcohol Rehabilitation Program or a service provider, check "yes."</li> <li>6. If permission to drive <u>during work hours</u> as a necessary part of the defendant's employment is granted check "yes" and complete Data Element 7 and 9. If such permission is not granted, check "no."</li> <li>7. If Data Element No. 4 or 6 is checked "yes," insert name of employer and offender's/petitioner's/juvenile's work location. Otherwise, strike through this line.</li> <li>8. If Data Element No. 4 is checked "yes," insert times of day when travel to and from work will be authorized such as "7-8 A.M. and 5-6 P.M. Monday to Friday" if one hour is allowed for travel each way and the offender/petitioner/juvenile works 8:00 A.M. to 5:00 P.M. Monday through Friday.</li> <li>9. If Data Element No. 6 is checked "yes," insert work schedule, such as "8:00 A.M. to 5:00 P.M. Monday to Friday" if the offender/petitioner/juvenile works 8:00 A.M. to 5:00 P.M. Monday through Friday.</li> <li>10. If permission is granted to drive to and from school, check "yes" and insert the school's name and the dates and times when the offender/petitioner/juvenile may drive to and from school, such as "8:00 A.M. to 9:00 A.M. and 5:00 P.M. to 6:00 P.M. Monday, Wednesday and Friday and 5:00 P.M. to 6:00 P.M. and 9:00 P.M. to 10:00 P.M. Tuesday and Thursday." If such permission is not granted, check "no."</li> <li>11. If permission is granted to drive to a facility for health care services for either the offender/petitioner/juvenile, an elderly parent or person residing in the household of the offender/petitioner/juvenile, check "yes" and the appropriate identifying box. Describe</li> </ol> | <p>location for medical services and (if so restricted) when travel is allowed, such as "9:00 A.M. to 11:00 A.M., Tuesday and Friday to Richmond Dialysis Center." If such permission is not granted, check "no."</p> <ol style="list-style-type: none"> <li>12. If Data Element No. 3 is checked and an ignition interlock device is ordered, check "yes." A copy of form DC-266, RESTRICTED LICENSE CONDITIONS--IGNITION INTERLOCK ORDER must also be completed and attached to this form. Otherwise, check "no."</li> <li>13. If permission is granted to drive to and from the facility that installed or monitors the ignition interlock, check "yes." If such permission is not granted, check "no."</li> <li>14. If permission is granted to transport a minor child to and from school, check "yes" and insert each school's name and dates and times when the offender/petitioner/juvenile may drive to and from the minor child's school, such as "8:00 a.m. to 9:00 a.m. and 5:00 to 6:00 p.m. Monday through Friday." If such permission is not granted, check "no."</li> <li>15. If permission is granted to transport a minor child to and from day care, check "yes" and insert each day care's name and dates and times when the offender/petitioner/juvenile may drive to and from the minor child's day care, such as "8:00 a.m. to 9:00 a.m. and 5:00 to 6:00 p.m. Monday through Friday." If such permission is not granted, check "no."</li> <li>16. If permission is granted to transport a minor child to and from facilities housing medical service providers, check "yes" and describe location of medical service provider and (if so restricted) when travel allowed, such as "9:00 a.m. to 11:00 a.m., Wednesday to Dr. Robert Physician at 3000 Hospital Drive, Richmond" or just the name and location of the provider. If such permission is not granted, check "no."</li> <li>17. If permission is granted to travel to and from court-ordered visitation, check "yes" and provide the names of the children and the location of the children. If such permission is not granted, check "no."</li> <li>18. If permission is granted to travel to and from appointments with a probation officer, check "yes" and enter the name of the probation entity and the location. If permission is not granted, check "no."</li> </ol> |
|---|---|

1 (i-2)  yes  no travel to and from programs required by court or as a condition of probation.

PROGRAM NAME AND LOCATION

PROGRAM NAME AND LOCATION

2 (j)  yes  no travel to and from a place of religious worship.

NAME AND LOCATION OF PLACE OF RELIGIOUS WORSHIP

AUTHORIZED DAY (ONE DAY PER WEEK) AND TIME FOR TRAVEL TO AND FROM PLACE OF RELIGIOUS WORSHIP

3 (k)  yes  no travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive case monitoring program for child support for which you have with you written proof of the appointment, including written proof of the date and time of the appointment.

4 (m)  yes  no travel to and from jail to serve jail sentence that is to be served on weekends or nonconsecutive days.

In addition, you may travel to and from court appearances in which you are a subpoenaed witness or a party, and should have in your possession the court summons or subpoena when you travel to and from such court appearances.

**BUT you may not operate a "commercial motor vehicle" as defined in Virginia Code § 46.2-341.4**

5

ORDER DATE

6

JUDGE

I have read ALL THREE PAGES of this Order in its entirety, I understand its contents, and I acknowledge that I must carry ALL THREE PAGES of this Order, and any attachment, at all times while operating a motor vehicle until this restricted license expires.

7

PETITIONER

**WARNING:** Forging or altering this Order or possessing a forged or altered order is a separate criminal offense punishable by fines and incarceration. Va. Code §§ 18.2-107, 18.2-168, 18.2-169. Driving outside of these restricted privileges constitutes a separate criminal offense.

**NOTE: This is page three of a three-page order for the following forms: DC-260, DC-265, DC-279, DC-282, DC-359, DC-576, DC-577**

**Data Elements, page three**

1. If permission is granted to travel to and from programs required by the court or as a condition of probation, check “yes” and enter the name and location of the program. If permission is not granted, check “no.”
2. If permission is granted to travel to and from a place of religious worship, check “yes” and enter the name and location and authorized day (one day per week) that the offender/petitioner/juvenile may drive to and from place of religious worship. If permission is not granted, check “no.”
3. If permission is granted to travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive case monitoring program for child support, check “yes.” If permission is not granted, check “no.”
4. If permission is granted to travel to and from jail to serve a jail sentence that is to be served on weekends or on nonconsecutive days, check “yes.” If permission is not granted, check “no.”
5. Date of entry of order.
6. Signature of judge.
7. Signature of offender/petitioner/juvenile.



### Using This Form

1. Copies
  - a. Original – to court.
  - b. First copy – to defendant.
  - c. Second copy – to Department of Motor Vehicles (DMV) if the order is not sent electronically.
  - d. Third copy – to program or agency.
2. Prepared by clerk, signed by judge and defendant.
3. Attachments – Abstract of Conviction (original of DMV copy or order only) if not sent electronically.
4. Preparation details
  - a. This order is primarily for use with adult defendants. For juveniles charged with driving while intoxicated or for certain drug or alcohol offenses, use district court form DC-576, DRIVER'S LICENSE DENIAL ORDER (JUVENILE).
  - b. This form may be used instead of district court form DC-265, RESTRICTED DRIVER'S LICENSE AND ENTRY INTO ALCOHOL SAFETY ACTION PROGRAM whenever an adult defendant enters an Alcohol Safety Action Program and a restricted driver's license is not issued.
  - c. Data Element No. 5 – This identification in this form is found on all warrants and summonses, including the VIRGINIA UNIFORM SUMMONS, and is used for abstracting purposes. Verify that the date of birth agrees with the birth date shown on the driver's license.
  - d. Data Element No 6 – For cases involving suspension or revocation of driver's license and privilege, the driver's license number is used by the Virginia Department of Motor Vehicles for driver's license reissuance and records updating. The arresting officer uses it for radio records checks and matching the order to the driver's license.

If the defendant does not have a driver's license, use the defendant's social security number followed by "(SSN)."
  - e. Data Element No 7 – The defendant should be required to surrender his copy of the pre-existing order before the defendant is given an amended order. If an amended order is entered, *do not* prepare an amended abstract of conviction to accompany a copy of the order being sent to the Department of Motor Vehicles.
  - f. The bottom of the order is to be completed by the program or agency upon completion of the enrollment process.

**ORDER TO ENTER INTO PROGRAM**

Commonwealth of Virginia  
VA. CODE §§ 4.1-305(F), 18.2-251, 18.2-252, 18.2-254, 18.2-271.1, 46.2-392

Case No. **1** .....

**2** .....

CITY/COUNTY

- Circuit Court
- General District Court
- Juvenile and Domestic Relations District Court

**3** .....

OFFENDER/PETITIONER

**4** .....

ADDRESS

.....

CITY STATE ZIP

**8** .....

OFFENSE DATE

**5** COMPLETE DATA BELOW IF KNOWN

RACE	SEX	BORN			HT.		WGT.	EYES	HAIR
		MO.	DAY	YR.	FT.	IN.			
D.L.#		STATE							

**6**

**7**  Original Order  Amended Order

Drugs **9**  Alcohol **10** ..... B.A.C

**11** { You have been convicted of  driving while intoxicated in violation of the Code of Virginia or local ordinance or a violation of a similar law in another jurisdiction  reckless driving  involuntary manslaughter or maiming while driving while intoxicated or  a drug offense found in Article 1 of Chapter 7 of Title 18.2;  the court has found facts sufficient to find you guilty of possession of a controlled substance or possession of marijuana, as described in Virginia Code § 18.2-251; or  the court has found facts sufficient to find you guilty of underaged consumption , purchase or possession of an alcoholic beverage under Virginia Code § 4.1-305(F).

**12** 1.  Your driver's license and privilege to drive have been suspended or revoked for a period of ..... and you MAY NOT DRIVE.

2. You are ORDERED to enter the following program:

**13** .....

PROGRAM/AGENCY NAME AND ADDRESS

**14** .....

FEE

3. You are not granted a restricted license privilege.

**15** 4.  Upon restoration of your privilege to drive, you may only operate a motor vehicle that is equipped with a functioning, certified ignition interlock system.

**16** .....

DATE

.....

JUDGE

PROGRAM USE ONLY: This is to certify that the above individual has enrolled in the above-named program in conformance with the Code of Virginia and the Order of the court.

**18** .....

DATE

.....

SIGNATURE

**20** .....

PRINT NAME

**21** .....

TITLE

## Data Elements

1. Court case number.
2. Court jurisdiction. Check applicable type of court.
3. Name of petitioner/defendant. Insert name *as is appears on driver's license* if a restricted driver's license is ordered by the judge to be issued.
4. *Current* address of defendant. The current address may not agree with the address shown on the driver's license.
5. Information describing the defendant. See Using This Form, 4(d).
6. Driver's license number of the defendant and state of issuance. See Using This Form, 4(e).
7. Check appropriate box to indicate if this is an original or amended order.
8. Date on which offense was committed.
9. Check the applicable box(es) to show whether the conviction was based on intoxication from alcohol, drugs, or both.
10. If Data Element No. 9 is checked "alcohol," add the blood alcohol content from test results admitted into evidence in court. If none was admitted, insert "not available."
11. Check appropriate box indicating offense of which defendant was convicted.
12. If convicted in Virginia of driving while intoxicated, check this box and insert period of time for which the driver's license is suspended, if applicable.
13. Insert name(s) and address(es) of program or agency and, if applicable, service providers. Also, include dates and times of meetings (if known at time of issuance) of program or service providers. (Example: "First Wed. 7:30-4:30 P.M.")
14. Insert net program fee that the defendant must pay, if known. Strike through remainder of blank line to prevent unauthorized additions.
15. Check this box if an ignition interlock system is required upon restoration of the defendant's privilege to drive.
16. Date signed by judge.
17. Signature of judge.
18. Date of completion by program or agency staff member.
19. Signature of program or agency staff member completing the form.
20. Printed name of staff member.
21. Title of staff member.

**Using This Form**

1. Copies – Original – to court.
2. Prepared by defendant except where noted, and signed by defendant. Approval section completed by judge and signed by judge.
3. Attachments – none.
4. Preparation details
  - a. This form is designed to facilitate the collection of information needed for completion of a restricted driver's license.
  - b. This form is not mandatory but may be useful to ensure that the correct information is contained on the restricted driver's license. The defendant should determine whether the court before whom the defendant will be appearing accepts this form.
  - c. If the defendant intends to request a restricted driver's license if convicted, the defendant would complete this form prior to his case being heard and provide it to the judge at that time.

**APPLICATION FOR RESTRICTED DRIVER'S LICENSE**

Commonwealth of Virginia

Case No. **1**

General District Court  
 Juvenile & Domestic Relations District Court

**2**  
CITY/COUNTY

**3**  
DEFENDANT

**6**  
DRIVER'S LICENSE NUMBER STATE

**4**  
ADDRESS

**7**  
DATE OF BIRTH

CITY STATE ZIP

**8**  
DATE OF OFFENSE

**5**  
TELEPHONE NUMBER

My driver's license has been suspended or denied for an offense which makes me eligible for a restricted driver's license; therefore, I request that the court grant a restricted driver's license for travel to and from the following locations for the following purpose(s):

(Court use only)  
**APPROVED**  
**10**

<p>(a) <input type="checkbox"/> Travel to and from primary job Name and Location of Employer: .....</p> <p>Days of Week: .....</p> <p>Leave Home: ..... Arrive at Work: .....</p> <p>Leave Work: ..... Arrive at Home: .....</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p><input type="checkbox"/> Travel to and from secondary job Name and Location of Employer: .....</p> <p>Days of Week: .....</p> <p>Leave Home: ..... Arrive at Work: .....</p> <p>Leave Work: ..... Arrive at Home: .....</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>(b) <input type="checkbox"/> Travel to and from VASAP</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>(c) <input type="checkbox"/> Travel during work hours <b>only as required by my employer:</b> Hours of required travel: .....</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p><b>Written verification must be carried</b></p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>(d) <input type="checkbox"/> Travel to and from school Name and Location of school: .....</p> <p>Days of Week: .....</p> <p>Leave Home: ..... Arrive at School: .....</p> <p>Leave School: ..... Arrive at Home: .....</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>(e) <input type="checkbox"/> Medically necessary travel for: <input type="checkbox"/> me <input type="checkbox"/> my elderly parent <input type="checkbox"/> a person residing in my household .....</p> <p>If for elderly parent or another person: Medical provider name: .....</p> <p>Location: .....</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>(f-1) Ignition Interlock on any motor vehicle that you operate, if required.</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> and on <u>each</u> motor vehicle owned by or registered to person</p>
<p>(f-2) <input type="checkbox"/> Travel to and from the facility that installed or monitors the ignition interlock in the vehicle(s), if ignition interlock is ordered.</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>(g-1) <input type="checkbox"/> Necessary travel to transport a minor child(ren), who is/are under my care, to and from his/her/their school. Name and Location of School: .....</p> <p>Dates and Times: .....</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>(g-2) <input type="checkbox"/> Necessary travel to transport a minor child(ren), who is/are under my care, to and from day care Name and Location of Day Care Provider: .....</p> <p>Dates and Times: .....</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>(g-3) <input type="checkbox"/> Necessary travel to transport a minor child(ren), who is/are under my care, to and from medical providers Name and Location of Medical Provider: .....</p> <p>Dates and Times: .....</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>

**NOTE: This is page one of a two-page form.**

**Data Elements, page one**

1. Court case number(s).
2. Court jurisdiction. Check applicable box for type of court.
3. Name of defendant whose license is suspended or who is petitioning.
4. Address of defendant.
5. Telephone number of defendant.
6. Defendant's driver's license number and state of issuance.
7. Defendant's date of birth.
8. Date of offense.
9. Defendant should check appropriate boxes and complete the information requested.
10. The judge should check either the "yes" or "no" box for each purpose.

**CONTINUED FROM PAGE 1**

(h) <input type="checkbox"/> Necessary travel for Court Ordered visitation with child(ren) Name(s): ..... Location of Child(ren): ..... Days and Times of Visitation: .....	<input type="checkbox"/> YES <input type="checkbox"/> NO
(i-1) <input type="checkbox"/> Travel to and from appointments with probation officer Name and Location of Probation entity .....	<input type="checkbox"/> YES <input type="checkbox"/> NO
(i-2) <input type="checkbox"/> Travel to and from programs required by court or as a condition of probation Program Name and Location: ..... Program Name and Location: .....	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>3</b> (j) <input type="checkbox"/> Travel to and from a place of religious worship Name and Location of place of religious worship: ..... <b>4</b> Day of Week (one day per week): ..... Leave Home: ..... Arrive at place of religious worship: ..... Leave place of religious worship: ..... Arrive Home: .....	<input type="checkbox"/> YES <input type="checkbox"/> NO
(k) <input type="checkbox"/> Travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive case monitoring program for child support for which I will have with me written proof of the appointment, including written proof of the date and time of the appointment.	<input type="checkbox"/> YES <input type="checkbox"/> NO
(m) <input type="checkbox"/> Travel to and from jail to serve a jail sentence that is to be served on weekends or on nonconsecutive days.	<input type="checkbox"/> YES <input type="checkbox"/> NO

I certify that the above information is true and accurate, that my driving privileges are not revoked or suspended for any other reason, and that I have no other pending charges against me that have not been divulged to the court. I understand that a Restricted Driver's License permits me to operate a motor vehicle under the conditions approved by the Court. I further understand that should I be found driving outside the restrictions of the Restricted Driver's License, I may be subject to the imposition of previously suspended sentences in this case and new criminal charges may be brought against me.

..... **5** .....  
DATE

..... **6** .....  
DEFENDANT'S SIGNATURE

Reviewed and Approved as indicated:

..... **7** .....  
DATE

..... **8** .....  
JUDGE

**NOTE: This is page two of a two-page form**

**Data Elements, *page two***

1. Name of defendant.
2. Court case number(s).
3. Defendant should check appropriate boxes and complete the information requested.
4. The judge should check either the “yes” or “no” box for each purpose.
5. Date signed by the defendant.
6. Defendant’s signature.
7. Date signed by the judge.
8. Judge’s signature.



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### Using This Form

1. Copies
  - a. Original (green\* safety paper) – to defendant.
  - b. First copy (canary) – to court.
  - c. Second copy (white) – to Department of Motor Vehicles (DMV).
  - d. Third copy (green) – to Virginia Alcohol Safety Action Program (VASAP).
2. Prepared by clerk, signed by judge and defendant.
3. Attachments
  - a. Abstract of conviction (original of DMV copy or order only).
  - b. Virginia driver's license if suspended or revoked or a restricted license ordered (should be sent to DMV).
  - c. District court form DC-210, ACKNOWLEDGEMENT OF SUSPENSION OR REVOCATION OF DRIVER'S LICENSE (if judge does *not* order the issuance of a restricted driver's license).
4. Preparation details
  - a. This order is primarily for use with adult defendants. For juveniles charged with driving while intoxicated or for certain drug or alcohol offenses, use district court form DC-576, DRIVER'S LICENSE DENIAL ORDER (JUVENILE)/DRIVER'S LICENSE SUSPENSION ORDER (UNDERAGE ALCOHOL VIOLATIONS).
  - b. The original of this 4-part set is printed on safety paper (like bank checks) to prevent forgery and tampering. Do not try to make corrections as changes cannot be made on safety paper. If an error is made, the entire form *must* be retyped.
  - c. This form must be used whenever an adult defendant enters an Alcohol Safety Action Program even if the issuance of a restricted license is not ordered. VASAP and DMV will use this form to provide better record-keeping regarding Program participants.
  - d. Data Element No. 5 – This identification information in this format is found on all warrants and summonses, including the VIRGINIA UNIFORM SUMMONS used for abstracting purposes. It is used to identify the defendant who is driving solely through review of this order pending a re-issuance of his driver's license by the Virginia Department of Motor Vehicles. Verify that the date of birth agrees with birth date shown on the driver's license.
  - e. Data Element No. 6 – The driver's license number is used by the Virginia Department of Motor Vehicles for driver's license reissuance and records updating. The arresting officer uses it for radio records checks and matching the order to the driver's license.

If the defendant does not have a driver's license, use the defendant's social security number followed by "(SSN)."

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\* Please note that the color of the top copy may vary, although referred to as "green" using printing technology.

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**Using This Form, *continued***

- f. Data Element No. 7 – The defendant should be required to surrender his copy of the pre-existing order (if the pre-existing order permitted the issuance of a restricted driver's license) before giving an amended order to the defendant. If an amended order is entered, *do not* prepare an amended abstract of conviction to accompany a copy of the order being sent to the Department of Motor Vehicles.
- g. Data Element Nos. 12, 13, 14 and 15 – One of these data elements must be checked (and, if applicable, completed) to show the action taken by the court, or the reason why the case, which resulted in this order being entered, was initiated.
- h. Data Element No. 18 may be used to postpone the commencement of the restricted driving privilege either when required by law for second offenders or so that the defendant has, as a learning experience, a short period of time without being permitted to drive.
- i. In setting the expiration date in Data Element No. 19, the judge should consider:
  - the estimated successful completion date of Program participation by the defendant.
  - the effect of any mandatory or discretionary license suspension imposed in this case which comes into effect when the order expires.

No action by the court is required to restore the regular driver's license of the defendant when this order expires.

- j. The reverse of the original of the order is to be completed by the local VASAP program upon completion of the VASAP enrollment process. The Defendant /Petitioner must present the original to DMV with the back side properly signed *and sealed* before DMV will give the Defendant/Petitioner a restricted license. The Defendant/Petitioner is no longer required by statute to return to court to show proof of enrollment.

The endorsement on the back of the VASAP copy is for internal VASAP purposes. The VASAP copy is to be sent directly to the VASAP program, and not through the Defendant /Petitioner.

- k. This is a three-page order. The second and third pages to be used with this form is designated form DC-261, RESTRICTED LICENSE ORDER.

**RESTRICTED DRIVER'S LICENSE ORDER AND ENTRY INTO ALCOHOL SAFETY ACTION PROGRAM**

Commonwealth of Virginia VA. CODE §§ 18.2-271.1, 46.2-360, 46.2-391

Case No. : ..... **1** .....

..... **2** ..... [ ] Circuit Court  
 CITY/COUNTY [ ] General District Court  
 [ ] Juvenile and Domestic  
 ..... **3** ..... Relations District Court  
 OFFENDER/PETITIONER

**5** COMPLETE DATA BELOW IF KNOWN

RACE	SEX	BORN			HT.		WGT.	EYES	HAIR
		MO.	DAY	YR.	FT.	IN.			
DL #								STATE	
<b>6</b>									

..... **4** .....  
 ADDRESS  
 ..... **8** .....  
 CITY STATE ZIP OFFENSE DATE

**7** [ ] Original Order [ ] Amended Order  
 [ ] Drugs **9** [ ] Alcohol ..... **10** ..... B.A.C.

You have been convicted of [ ] driving while intoxicated in violation of the Code of Virginia or local ordinance or a violation of a similar law in another jurisdiction, [ ] involuntary manslaughter or maiming while driving while intoxicated; or [ ] have been adjudicated/determined to be an habitual offender. In this case, **11**

- 12** [ ] Your driver's license and privilege to drive have been suspended or revoked for a period of ..... and you MAY NOT DRIVE except as allowed by this Restricted Driver's License Order.
  - 13** [ ] You seek a restricted license after having been convicted in another jurisdiction of driving while intoxicated as a result of which your driver's license has been or will be suspended by the Department of Motor Vehicles.
  - 14** [ ] You seek a restricted license after [ ] having been declared an habitual offender and/or [ ] having had your license revoked pursuant to Virginia Code § 46.2-391(B) three years or more prior to this date.
  - 15** [ ] You seek a restricted license after having been declared an habitual offender five or more years prior to this date, the provisions of Virginia Code §§ 46.2-360 or 46.2-361 do not apply, and this Court has found that you do not constitute a threat to the safety and welfare of yourself or others with regards to the driving of a motor vehicle.
2. You are ORDERED, on the terms and conditions listed below, to enter the following Alcohol Safety Action Program (the Program):

**16**

..... PROGRAM NAME AND ADDRESS FEE .....

- 3** [ ] No restricted license privilege is granted to the Petitioner by this ORDER.
- 17** [ ] A restricted license privilege is granted to the Petitioner for the purposes enumerated on the second and third pages of this Order and subject to the conditions below.

**CONDITIONS OF RESTRICTED LICENSE: If a restricted license privilege is granted by this Order, the restricted license is to be issued upon the following conditions:**

- (1) **This privilege is subject to any other conditions, restrictions, suspensions or revocations imposed by any court of competent jurisdiction or the Virginia Department of Motor Vehicles. If your license is suspended for other reasons, the privileges of this license may be VOID and the Department of Motor Vehicles may refuse to issue you a restricted license.**
- (2) You shall satisfactorily and timely comply with and successfully complete the Program's requirements.
- (3) You shall immediately notify this Court, the Virginia Department of Motor Vehicles, and the Program of any change of residential address; or of any change to the information listed in items "a" through "m" on pages two and three of this Order.
- (4) ..... **18** ..... Commencement date of restricted license privilege. This privilege EXPIRES 15 DAYS from this date unless proof of enrollment in the Program named above is endorsed on the back of page one of this ORDER. In addition, this privilege EXPIRES 60 DAYS from this date if this ORDER is not accompanied by a restricted license issued by the Virginia Department of Motor Vehicles or by your home state license if you are not a Virginia resident.
- (5) ..... **19** ..... Expiration date of this restricted license Order unless withdrawn or modified by this Court. Upon expiration of this restricted license Order, issuance of a driver's license shall be subject to other conditions, restrictions, suspensions or revocations imposed by any court of competent jurisdiction or the Virginia Department of Motor Vehicles.
- (6) You shall carry ALL THREE PAGES of this ORDER, and any attachment, at all times while operating a motor vehicle until this restricted license expires.

**20** [ ] Please see reverse side for other applicable conditions.

**WARNING:** Forging or altering this Order or possessing a forged or altered order is a separate criminal offense punishable by fines and incarceration. Va. Code §§ 18.2-107, 18.2-168, 18.2-169. Driving outside of these restricted privileges constitutes a separate criminal offense.

**NOTE: This is page one of a three-page order.**

## Data Elements, page one, front

- |  |  |
|--|--|
| <ol style="list-style-type: none"> <li>1. Court case number.</li> <li>2. Court jurisdiction. Check applicable type of court.</li> <li>3. Name of petitioner/defendant. Insert name <i>as it appears on driver's license</i> if a restricted driver's license is ordered by the judge to be issued.</li> <li>4. <i>Current</i> address of defendant. The current address may not agree with the address shown on the driver's license.</li> <li>5. Information describing the defendant. See Using This Form, 4(d).</li> <li>6. Driver's license number of the defendant and state of issuance. See Using This Form, 4(e).</li> <li>7. Check appropriate box to indicate if this is an original or amended order.</li> <li>8. Date on which offense was committed.</li> <li>9. Check the applicable box(es) to show whether the conviction was based on intoxication from alcohol, drugs, or both.</li> <li>10. If Data Element No. 9 is checked "alcohol," add the blood alcohol content from test results admitted into evidence in court. If none was admitted, insert "not available."</li> <li>11. Check appropriate box indicating offense of which defendant was convicted.</li> <li>12. If convicted in Virginia of driving while intoxicated, check this box and insert period of time for which the driver's license is suspended, if applicable. See Using This Form, 4(g).</li> </ol> | <ol style="list-style-type: none"> <li>13. If convicted outside of Virginia of driving while intoxicated, check this box. See using This Form, 4(g).</li> <li>14. If found to be an habitual offender or if convicted of involuntary manslaughter or maiming while driving while intoxicated or if convicted of a second or subsequent offense of driving while intoxicated and seeking a restricted license at least 3 years after such finding, check this box. See Using This Form, 4(g).</li> <li>15. If found to be an habitual offender and seeking a restricted license at least 5 years after such finding, check this box. See Using This Form, 4(g).</li> <li>16. Insert name(s) and address (es) of Alcohol Safety Action Program and, if applicable, service providers. Also include dates and times of meetings (if known at time of issuance) of Program or service providers (Example: "First Wed. 7:30-4:30 P.M.") and net program fee that the defendant must pay. Strike through remainder of blank line to prevent unauthorized additions.</li> <li>17. Check appropriate box to indicate <u>if</u> a restricted driver's license <u>is</u> to be issued.</li> <li>18. If a restricted driver's license is being issued, date on which restricted privilege to drive commences.</li> <li>19. If a restricted driver's license is being issued, expiration date of this restriction. See Using This Form, 4(i).</li> <li>20. Check if other applicable conditions are listed on the reverse side.</li> </ol> |
|--|--|

Other applicable conditions:

**1**

.....

.....

.....

.....

.....

**This is to certify that the offender described on the front of this Order has enrolled in the Program named in this Order.**

**2**

DATE

**3**

TITLE

**4**

SIGNATURE

**Data Elements, page one, reverse**

1. List other applicable conditions.
2. Date of completion of reverse side of this form by VASAP staff member.
3. Title of VASAP staff member completing the reverse side of this form.
4. Signature of VASAP staff member completing the reverse side of this form.

---

**Using This Form**

1. Copies
  - a. Original – to Petitioner to be attached to district court form DC-265, RESTRICTED LICENSE ORDER AND ENTRY INTO ALCOHOL SAFETY ACTION PROGRAM.
  - b. First copy – to court.
  - c. Second copy – to the Division of Motor Vehicles.
  - d. Third copy – to Virginia Alcohol Safety Action Program (VASAP).
2. Prepared by clerk, signed by judge and by defendant.
3. Attachments – this form *must* be attached to district court form DC-265, RESTRICTED LICENSE ORDER AND ENTRY INTO ALCOHOL SAFETY ACTION PROGRAM.
4. Preparation details
  - a. The original of this 4-part form is printed on safety paper (like bank checks) to prevent forgery and tampering. Do not try to make corrections as changes cannot be made on safety paper. If an error is made, the entire form must be retyped.
  - b. This form must be attached to district court form DC-261, RESTRICTED LICENSE ORDER, both of which must be carried by the defendant/petitioner when operating a motor vehicle.
  - c. Data Element No. 9 – the defendant should be required to surrender his copy of any pre-existing order imposing restrictions on his privilege to drive before an amended order is issued to the defendant.
  - d. The back of the original order is to be completed by the local VASAP program that will monitor the ignition interlock system. The defendant/petitioner must present the original Restricted License Order *and* the original of this form to DMV with the back properly signed and sealed before DMV will issue petitioner a restricted license. The VASAP copy should be sent directly to the VASAP program by the court and not through the defendant.

**RESTRICTED LICENSE CONDITIONS –  
IGNITION INTERLOCK ORDER**  
(MUST BE ATTACHED TO THE RESTRICTED LICENSE ORDER)  
Commonwealth of Virginia VA. CODE § 18.2-270.1

Case No. 1

General District Court  
 Circuit Court

2  
CITY OR COUNTY

3 OFFENDER      4 DRIVER'S LICENSE NUMBER      5 STATE

TO THE OFFENDER:

Effective 6, you may only, unless otherwise permitted below, operate a motor vehicle equipped with a functioning, certified, ignition interlock system, including not less than 6 consecutive months without alcohol-related violations, until:

the period of license suspension/revocation has ended or

7  .....

An ignition interlock system must be installed on any motor vehicle that you operate, and

8  You are required to install an ignition interlock system on each motor vehicle owned by or registered to you, in whole or in part, as you have been convicted under Virginia Code § 18.2-51.4 or have been convicted of a second or subsequent offense of Virginia Code § 18.2-266 or a substantially similar ordinance of any county, city or town, or as a condition of license restoration pursuant to Virginia Code § 18.2-271.1(C) or § 46.2-391.

You are required to have an electronic log device installed with the ignition interlock system to measure and record the blood alcohol content at each attempted ignition and random rolling retest during operation of the vehicle.

You shall provide the Commission on VASAP, at least quarterly during the period of court-ordered ignition interlock installation, a printout from such electronic log indicating your blood alcohol content during such ignitions, attempted ignitions, and rolling retests, and showing attempts to circumvent or tamper with the equipment.

You shall provide the Commission on VASAP, within 30 days of the effective date of this order, proof of the installation of the ignition interlock system. You shall pay the cost of installing such system, including leasing or buying the system, as well as monitoring and maintaining the system. The court may revoke your driving privilege for failing to (i) timely install such system or (ii) have the system properly monitored and calibrated.

9  Yes  No You are permitted, solely in the course of your employment, to operate a motor vehicle which is owned or provided by your employer without installation of an ignition interlock system but you may not operate a school bus, school vehicle, or a commercial motor vehicle as defined in Va. Code § 46.2-341. (This is not allowed if your employer is an entity wholly or partially owned or controlled by you.)

10  Yes  No You have been found by the court to be indigent and are eligible for the fund established by Virginia Code § 18.2-270.2 to defray all or part of the costs of the ignition interlock device.

You must carry this order, attached to your restricted license order, with you at all times when operating a motor vehicle.

11  Original order  
 Amended order .....  
DATE

12  
JUDGE

I have read this Order in its entirety and I understand it completely.

13  
OFFENDER

**WARNING:** Forging or altering this Order or possessing a forged or altered order is a separate criminal offense punishable by fines and incarceration. Va. Code §§ 18.2-107, 18.2-168, 18.2-169. Driving outside of these restricted privileges can result in a conviction of driving on a suspended license.



**Data Elements, front**

1. Court case number.
2. Name of court.
3. Name of defendant.
4. Driver's license number.
5. State of issuance of driver's license.
6. Date ignition interlock restriction begins.
7. Check appropriate box and add a date if necessary.
8. Check if applicable.
9. Check the appropriate box.
10. Check the appropriate box.
11. Check the appropriate box and add the date of entry of the order.
12. Signature of judge.
13. Signature of defendant.

VASAP Use Only: This is to certify that the offender identified on the front of this Order has installed an ignition interlock device on motor vehicles operated by the offender

**1** [ ] including each motor vehicle owned by or registered to the offender, in whole or in part, as required by this Order.

**2**

DATE

**3**

TITLE

**4**

SIGNATURE

**5**

**Data Elements, reverse**  
*(Petitioner/VASAP)*

1. Check this box if offender has installed an ignition interlock device on each motor vehicle owned by or registered to the offender, if required by the order.
2. Date of completion of back of this form by VASAP staff member.
3. Title of VASAP staff member completing the back of this form.
4. Signature of VASAP staff member completing the back of this form.
5. VASAP program seal.

**Using This Form**

1. Copies (This is a master form and may be photocopied as local needs dictate.)
  - a. Original – to Department of Motor Vehicles
  - b. First copy – to driver.
  - c. Second copy – to arresting officer.
2. Prepared by magistrate.
3. Attachments – none.
4. Preparation details
  - a. The driver’s residential address should be the actual current street address (not a post office box number), even if such information differs from the address shown on the driver’s license.
  - b. The “operating authority” is the entity which controls the operation of the vehicle by the driver.
  - c. Upon completion of this form by the magistrate and its execution by the serving officer, the magistrate sends the order directly to:

Virginia Department of Motor Vehicles  
P.O. Box 27412  
Richmond, Virginia 23269

# OUT OF SERVICE ORDER – DRIVER

Commonwealth of Virginia

VA. CODE §§ 46.2-341.26:2; 46.2-341.26:3

## Commercial Motor Vehicle Driver Data

**1** ..... **2**  
LAST NAME FIRST NAME MIDDLE INITIAL BIRTH DATE

**3** .....  
RESIDENTIAL ADDRESS CITY STATE ZIP

Driver's License: **4** ..... **5**  
NUMBER STATE

## Commercial Motor Vehicle Data

Vehicle Data: **6**  26,001 + GVWR or GCWR  16 + pass. rating  HAZ. Mat.

**7** ..... **8** ..... **9** ..... **10**  
POWER UNIT – TAG NUMBER AND STATE VEHICLE ID NUMBER MAKE YEAR

Trailers? **11**  none  one  two

Motor Carrier Operating Authority:

**12** .....  
NAME **13** STREET ADDRESS CITY STATE ZIP

ICC  SCC  U.S. DOT .....  
MOTOR CARRIER ID NUMBER

### To the Above-Described Driver:

You are prohibited from driving a “commercial motor vehicle” as defined by law for a period of 24 hours from the time of the entry of this order because:

- 14**  you unreasonably refused to take a blood or breath test to determine the alcohol or drug content, if any, in your blood in violation of Va. Code § 46.2-341.26:2(B).
- you took a breath test to determine the alcohol content, if any, in your blood and there is probable cause to believe based on the test results that you were driving a commercial motor vehicle with a measurable amount of alcohol in your blood in violation of Va. Code § 46.2-341.26:2(C).

**15** ..... **16**  
DATE AND TIME MAGISTRATE

**17** ..... , Virginia  
CITY/COUNTY OF ISSUANCE

I personally served the driver with this order in the above-described jurisdiction.

**18** ..... **19** ..... **20** ..... **21**  
DATE SIGNATURE BADGE CODE AGENCY

**Data Elements**

1. Driver's name.
2. Driver's date of birth.
3. Driver's residential address. See Using This Form, 4.a.
4. Driver's license number.
5. Name of state that issued driver's license.
6. Check the applicable box(es) to show the facts that classify the vehicle as a commercial motor vehicle.
7. License tag number on truck or the tractor portion of a tractor-trailer combination.
8. Vehicle identification number of truck or the tractor portion of a tractor-trailer combination.
9. "Brand name" of truck or the tractor portion of a tractor-trailer combination.
10. Model year of truck or the tractor portion of a tractor-trailer combination.
11. Check the number of trailers being towed by the truck or tractor.
12. Name and street address of the owner, lessee, etc., who is listed as the operating authority.
13. Motor carrier identification number of the operating authority. Check the applicable box to show the type of identification number. See Using This Form, 4.b.
14. Check the applicable box to show why the Out of Service Order was entered.
15. Date and time of signing of order by magistrate.
16. Signature of magistrate.
17. City or county where Out of Service Order issued.
18. Date of service of the order.
19. Signature of serving officer.
20. Badge number or code number of serving officer.
21. Agency by whom the serving officer is employed.

**Using This Form**

1. Copies
  - a. Original – to court.
2. Prepared by petitioner. Clerk inserts case number and hearing date, Data Element Nos. 1 and 2.
3. Attachments –
  - a. Copies of any petitions filed in other Virginia courts seeking relief from additional license suspensions for failure to pay fines, costs, forfeiture, restitution and/or penalty.
4. Preparation details
  - a. This form may be used by an individual who would like to request a restricted driver's license and whose license to drive a motor vehicle in Virginia was suspended by a court for failure to pay fines, costs, forfeiture, restitution and/or penalty assessed by that particular court.
  - b. The petitioner may not ask for the privilege to drive to and from visitation with his/her children if such visitation is otherwise prohibited.

**PETITION FOR AUTHORIZATION FOR RESTRICTED DRIVER'S LICENSE – FAILURE TO PAY FINES AND COSTS**

Commonwealth of Virginia VA. CODE §§ 46.2-395(E), 18.2-271.1

Case No. **1**

Hearing Date: **2**

General District Court  Circuit Court  
 Juvenile and Domestic Relations District Court

**3**

CITY OR COUNTY

**4**

PETITIONER

**5**

DRIVER'S LICENSE NUMBER

STATE

**6**

ADDRESS

**7**

DATE OF BIRTH

CITY/STATE

ZIP CODE

To the above-named court:

**8**

PRINT NAME

I, \_\_\_\_\_, the undersigned, respectfully request this Court to authorize the Department of Motor Vehicles to issue to me a restricted driver's license, for good cause shown, and further state the following:

My privilege to drive a motor vehicle on the highways of the Commonwealth was suspended by this Court for failure to pay, either in full or in accordance with a deferred or installment payment agreement, fines, costs, forfeiture, restitution and/or penalty as assessed against me by this Court, pursuant to Virginia Code § 46.2-395, in connection with the following cases:

**9**

CASE NUMBER	OFFENSE	OFFENSE DATE	CONVICTION DATE
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

**10** ] Additional sheet attached

**11**  I have additional license suspensions in other Virginia courts for the failure to pay, either in full or in accordance with a deferred or installment plan, fines, costs, forfeiture, restitution and/or penalty assessed against me by the respective court(s). **12**  Copies of the petitions seeking relief for those suspensions are attached, if such petitions have been filed.

Written verification of my employment is attached.

Upon knowledge and belief, I am otherwise eligible for a restricted license.

I request the Court to authorize the Department of Motor Vehicles to issue to me a restricted driver's license for the following purpose(s):

**13** (a)  travel to or from my place of employment as described below.

**14** (b)  travel to and from an alcohol rehabilitation or safety action program.

**15** (c)  travel during my hours of employment, because the operation of a motor vehicle is necessary to my employment described below.

**16**

EMPLOYER NAME AND WORK LOCATION

**17**

HOURS FOR TRAVEL TO AND FROM WORK

**18**

HOURS OF EMPLOYMENT

**19**(d)  travel to and from school. (I understand that I must provide proper written verification to the court that I am enrolled in a continuing program of education.)

**19**

SCHOOL NAME AND LOCATION

REQUESTED DATES AND TIMES FOR TRAVEL TO AND FROM SCHOOL

**20**(e)  medically necessary travel for  me  elderly parent  person residing in my household. (I understand that I must provide written verification from a licensed health professional of the need for such travel for an elderly parent or household member.)

**20**

NAME AND LOCATION OF PROVIDER OF MEDICAL SERVICES

**21**(g 1-3)  travel necessary to transport a minor child or children under my care

(1)  to and from school (2)  to and from day care

(3)  to and from facilities housing medical service provider.

**21**

NAME AND LOCATION OF SCHOOL/DAY CARE/MEDICAL SERVICE PROVIDER



**Data Elements, *front***

1. Court case number.
2. Hearing date and time.
3. Court name. Check applicable type of court.
4. Name of individual requesting a restricted license.
5. Petitioner's driver's license number and issuing state.
6. Petitioner's address.
7. Petitioner's date of birth.
8. Petitioner's name.
9. List the case number, offense, offense date and conviction date for each relevant conviction in the court indicated in Data Element No. 3 for which the privilege to drive in Virginia was suspended for failure to pay fines, costs, forfeiture, restitution and/or penalty in connection with those convictions.
10. Check this box if additional such convictions are listed on an attached sheet.
11. Check this box if petitioner has additional license suspensions in other Virginia courts for failure to pay fines, costs, forfeiture, restitution and/or penalty.
12. Check this box if petitions have been filed in other Virginia courts seeking relief from those suspensions, and attach copies of those petitions.
13. Check if restricted license sought to travel to and from petitioner's employment.
14. Check if restricted license sought for travel to and from Alcohol Rehabilitation Program.
15. Check if restricted license sought to drive during petitioner's hours of employment.
16. Name of petitioner's employer and work location.
17. Hours of travel to and from work location.
18. Petitioner's hours of employment if travel during work hours is requested.
19. Check if travel to and from school is requested. Fill in name of school, location, and dates and time of travel if applicable.
20. Check if requesting medically necessary travel for petitioner, petitioner's elderly parent or person residing in the household of petitioner. One or more of the boxes must be checked to indicate if the medically necessary travel is for the petitioner or his or her elderly parent or household member. Fill in name and location of provider of medical services if applicable.
21. Check if requesting travel necessary to transport a child under the petitioner's care to and from school, to and from day care or to and from a medical service provider. If requesting such check the appropriate destination and fill in the name and location.

**1** (h) [ ] travel to and from court ordered visitation with my child or children.

**1**

NAME AND LOCATION OF CHILD OR CHILDREN

**2** (i-1) [ ] travel to and from appointments with my probation officer.

**2**

NAME AND LOCATION OF PROBATION ENTITY

**3** (i-2) [ ] travel to and from programs required by court or as a condition of probation.

**3**

PROGRAM NAME AND LOCATION

**4** (j) [ ] travel to and from a place of religious worship.

**4**

NAME AND LOCATION OF PLACE OF RELIGIOUS

**4**

REQUESTED DAY (ONE DAY PER WEEK) AND TIME FOR TRAVEL TO AND FROM PLACE OF RELIGIOUS WORSHIP

**5** (k) [ ] travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive monitoring program for child support for which I will have with me written proof of the appointment, including written proof of the date and time of the appointment.

**6** (m) [ ] travel to and from jail to serve jail sentence that is to be served on weekends or nonconsecutive days.

I understand that the court may decide not to authorize the Department of Motor Vehicles to issue to me a restricted driver's license.

If this court does authorize the Department of Motor Vehicles to issue to me a restricted driver's license, I understand that I may not drive unless all courts that suspended my driver's license for failure to pay, either in full or in accordance with a deferred or installment payment agreement, fines, costs, forfeiture, restitution and/or penalty as assessed against me by a court for violation of the laws of the Commonwealth or of a valid local ordinance have authorized a restricted driver's license and until receipt of such a restricted license from the Department of Motor Vehicles.

I understand that a restricted driver's license will not permit me to operate a commercial motor vehicle.

I understand that a restricted driver's license will not authorize visitation of my child or children if visitation is otherwise prohibited.

**7**

DATE

**8**

PETITIONER'S SIGNATURE

**Data Elements, *reverse***

1. Check if requesting travel to and from court-ordered visitation with children. Fill in the names and locations of children to be visited.
2. Check if requesting travel to and from appointments with a probation officer.
3. Check if requesting travel to and from programs required by the court as a condition of probation.
4. Check if requesting travel to and from place of religious worship. Fill in name, location, and requested day (one day per week) and time of travel to and from place of religious worship.
5. Check if requesting travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive monitoring program for child support.
6. Check if requesting travel to and from jail to serve a jail sentence that is to be served on weekends or nonconsecutive days.
7. Date form signed by petitioner.
8. Signature of petitioner.

**Using This Form**

1. Copies
  - a. Original (blue\* safety paper) – to defendant.
  - b. First copy (canary) – to court.
  - c. Second copy (white) – to Department of Motor Vehicles (DMV).
2. Prepared by clerk, signed by judge.
3. Attachments
  - a. Abstract of conviction(s) (original of DMV copy or order only).
  - b. District court form DC-210, ACKNOWLEDGMENT OF SUSPENSION OR REVOCATION OF DRIVER'S LICENSE.
4. Preparation details
  - a. The original of this 3-part set is printed on safety paper (like bank checks) to prevent forgery and tampering. Do not try to make corrections as changes cannot be made on safety paper. If an error is made, the entire form *must* be retyped.
  - b. Data Element No. 5 – The driver's license number is used by the Virginia Department of Motor Vehicles for driver's license reissuance and record updating. The arresting officer uses it for radio records checks and matching the order to the driver's license.

\* Please note that the color of the top copy may vary, although referred to as "blue" using printing technology.

**AUTHORIZATION FOR RESTRICTED DRIVER'S LICENSE – FAILURE TO PAY FINES AND COSTS**

Commonwealth of Virginia VA. CODE §§ 46.2-395(E), 18.2-271.1

Case No. 1

General District Court  Circuit Court  
 Juvenile and Domestic Relations District Court

2  
CITY OR COUNTY

3  
PETITIONER

4  
ADDRESS

CITY/STATE ZIP CODE

5  
DRIVER'S LICENSE NUMBER STATE

6  
DATE OF BIRTH

**7**  Amended Authorization

Finding that the petitioner's privilege to drive a motor vehicle was suspended by this Court for failure to pay, either in full or in accordance with a deferred or installment payment agreement, fines, costs, forfeiture, restitution and/or penalty as assessed against the petitioner by this Court pursuant to Virginia Code § 46.2-395 in connection with the cases listed on the following page(s). This list is incorporated into this order by reference.

This Court finds:

**8**  the petition is denied and the Department of Motor Vehicles is NOT authorized to issue a restricted driver's license to the above-named petitioner.

**9**  upon written verification of employment and a showing of good cause, I authorize the Department of Motor Vehicles to issue a restricted driver's license to the above-named petitioner, for the following purposes:

(a)  travel to or from the place of employment, as described below, by the most direct route.

(b)  travel to and from VASAP.

(c)  travel during the hours of employment, because the operation of a motor vehicle is necessary to the employment described below.

EMPLOYER NAME AND WORK LOCATION

HOURS FOR TRAVEL TO AND FROM WORK

HOURS OF EMPLOYMENT

(d)  travel to and from school

SCHOOL NAME AND LOCATION

DATES AND TIMES FOR TRAVEL TO AND FROM SCHOOL

(e)  medically necessary travel for  petitioner  elderly parent  person residing in petitioner's household.

NAME AND LOCATION OF PROVIDER OF MEDICAL SERVICES

(g 1-3)  travel necessary to transport a minor child or children (1)  to and from school (2)  to and from day care and/or (3)  to and from facilities housing medical service provider.

NAME AND LOCATION OF SCHOOL/DAY CARE/MEDICAL SERVICE PROVIDER

(h)  travel to and from court ordered visitation with petitioner's child or children.

NAME AND LOCATION OF CHILD OR CHILDREN

(i-1)  travel to and from appointments with petitioner's probation officer.

NAME AND LOCATION OF PROBATION ENTITY

(i-2)  travel to and from programs required by court or as a condition of probation.

PROGRAM NAME AND LOCATION

(j)  travel to and from a place of religious worship.

NAME AND LOCATION OF PLACE OF RELIGIOUS WORSHIP

AUTHORIZED DAY (ONE DAY PER WEEK) AND TIME OF TRAVEL TO AND FROM PLACE OF RELIGIOUS WORSHIP

(k)  travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive case monitoring program for child support for which the petitioner has with him or her written proof of the appointment, including written proof of the date and time of the appointment.

(m)  travel to and from jail to serve a jail sentence that is to be served on weekends or nonconsecutive days.

**10**  duration of DMV restricted license: ..... months.

11  
DATE

12  
JUDGE

**NOTE: This is page one of a two-page authorization.  
Read the second page for information about this authorization.**

**Data Elements, page one**

1. Court case number.
2. Court jurisdiction. Check applicable type of court.
3. Name of petitioner/defendant. Insert name *as it appears on driver's license* if a registered driver's license is authorized by the judge to be issued by DMV.
4. *Current* address may not agree with the address shown on the driver's license.
5. Driver's license number of the petitioner and state of issuance.
6. Insert petitioner's date of birth.
7. Check appropriate box to indicate if this is an amended authorization.
8. Check the box if the petition is denied.
9. Check the box if the petition for authorization for a restricted driver's license is granted, check appropriate boxes below and insert information in the fields provided.
10. Check the box to indicate court-ordered restriction on the duration of the DMV restricted license and provide number of months in the field provided.
11. Date signed by judge.
12. Judge's signature.

**AUTHORIZATION FOR RESTRICTED DRIVER'S LICENSE – FAILURE TO PAY FINES AND COSTS**

**This authorization is not a restricted driver's license.**

**You must obtain a restricted driver's license from the Department of Motor Vehicles before you can operate a motor vehicle.**

Even if this Court has authorized the Department of Motor Vehicles to issue you a restricted driver's license for the suspension imposed by this Court, the Department of Motor Vehicles will not issue a restricted driver's license to you unless each court which suspended your driver's license for failure to pay, either in full or in accordance with a deferred or installment payment agreement, fines, costs, forfeiture, restitution and/or penalty, has also authorized a restricted driver's license.

If you obtain a restricted driver's license, it is against the law to operate a motor vehicle in violation of any of the conditions of a restricted driver's license. **You may not operate a "commercial motor vehicle" as defined in Virginia Code § 46.2-341.4.**

You must carry this authorization, with the conditions of the authorization, with you when operating a motor vehicle, along with the restricted driver's license you obtain from the Department of Motor Vehicles.

Convictions in this court which led to suspension of your license for failure to pay fines, costs, forfeitures, restitution and/or penalties.

**1**

CASE NUMBER	OFFENSE	OFFENSE DATE	CONVICTION DATE

**2** [ ] Additional sheet attached

**Data Elements, *page two***

1. Insert case number, offense, offense date, and conviction date for all convictions for which the petitioner has failed to pay fines, costs, forfeitures, restitution and/or penalties assessed against petitioner by court identified on page one, Data Element No. 2.
2. Check if additional sheet listing convictions is attached.



**Using This Form**

1. Copies
  - a. Original – to court.
2. Prepared by petitioner. Clerk prepares case number and hearing date, Data Element Nos. 1 and 2.
3. Attachments
  - a. Copies of any petitions filed in other Virginia courts seeking relief from additional license suspensions as a result of convictions for driving without authorization to drive.
4. Preparation details
  - a. This form may be used by an individual who would like to request a restricted driver's license and whose license to drive a motor vehicle in Virginia was suspended by a court for driving in Virginia after the person's driver's license, learner's permit or privilege to drive a motor vehicle was suspended or revoked; after being directed not to drive by any court or the Commissioner; or after having been forbidden to operate a motor vehicle as required by statute or by ordinance.
  - b. The petitioner may not ask for the privilege to drive to and from visitation with his/her children if such visitation is otherwise prohibited.

**PETITION FOR AUTHORIZATION FOR RESTRICTED DRIVER'S LICENSE – CONVICTION FOR UNAUTHORIZED DRIVING**

Commonwealth of Virginia VA. CODE §§ 46.2-301(E), 18.2-271.1

Case No. **1**

Hearing Date: **2**

General District Court  Circuit Court  
 Juvenile and Domestic Relations District Court

**3**  
CITY OR COUNTY

**4**  
PETITIONER

**6**  
ADDRESS

CITY/STATE ZIP CODE

**5**  
DRIVER'S LICENSE NUMBER STATE

**7**  
DATE OF BIRTH

To the above-named court:

I, **8**, the undersigned, respectfully request this Court to authorize the

Department of Motor Vehicles to issue to me a restricted driver's license, for good cause shown, and further state the following:

My privilege to drive a motor vehicle on the highways of the Commonwealth was suspended by this Court pursuant to § 46.2-301(D) for a violation of § 46.2-301(B), specifically, driving any motor vehicle or any self-propelled machinery or equipment on any highway in Virginia after having my driver's license, learner's permit, or privilege to drive a motor vehicle suspended or revoked; after having been directed not to drive by any court or by the Commissioner; or after having been forbidden to operate a motor vehicle as required by statute or by ordinance, in connection with the following cases:

CASE NUMBER	OFFENSE	OFFENSE DATE	CONVICTION DATE
<b>9</b>			

**10**  Additional sheet attached

**11**  I have additional license suspensions in other Virginia courts pursuant to § 46.2-301(D) for a violation of § 46.2-301(B), specifically, driving any motor vehicle or any self-propelled machinery or equipment on any highway in Virginia after having my driver's license, learner's permit, or privilege to drive a motor vehicle suspended or revoked; after having been directed not to drive by any court or by the Commissioner; or after having been forbidden to operate a motor vehicle as required by statute or by ordinance.

**12**  Copies of the petitions seeking relief for those suspensions are attached.

Upon knowledge and belief, I am otherwise eligible for a restricted license, and the period of time for which my license was suspended by the court pursuant to § 46.2-301(D), if measured from the date of conviction, has expired even though the suspension itself has not expired.

I request the Court to authorize the Department of Motor Vehicles to issue to me a restricted driver's license for the following purpose(s):

- 13**(a)  travel to or from my place of employment as described below.
- 14**(b)  travel to and from an alcohol rehabilitation or safety action program.
- 15**(c)  travel during my hours of employment, because the operation of a motor vehicle is necessary to my employment described below.

**16**  
EMPLOYER NAME AND WORK LOCATION

**17**  
HOURS FOR TRAVEL TO AND FROM WORK

**18**  
HOURS OF EMPLOYMENT

**19**(d)  travel to and from school. (I understand that I must provide proper written verification to the court that I am enrolled in a continuing program of education.)

SCHOOL NAME AND LOCATION

REQUESTED DATES AND TIMES FOR TRAVEL TO AND FROM SCHOOL

**20**(e)  medically necessary travel for  me  elderly parent  person residing in my household. (I understand that I must provide written verification from a licensed health professional of the need for such travel for an elderly parent or household member.)

**20**  
NAME AND LOCATION OF PROVIDER OF MEDICAL SERVICES

---

**Data Elements, page one**

1. Court case number.
2. Hearing date and time.
3. Court name. Check applicable type of court.
4. Name of individual requesting a restricted license.
5. Petitioner's driver's license number and issuing state.
6. Petitioner's address.
7. Petitioner's date of birth.
8. Petitioner's name.
9. List the case number, offense, offense date and conviction date for each conviction for driving without authorization to drive in the court indicated in Data Element No. 3 for which the privilege to drive in Virginia was suspended.
10. Check this box if additional such convictions are listed on an attached sheet.
11. Check this box if petitioner has additional license suspensions in other Virginia courts as a result of convictions for driving without authorization to drive.
12. Check this box if petitions have been filed in other Virginia courts seeking relief from those suspensions, and attach copies of the petitions.
13. Check if restricted license sought to travel to and from petitioner's employment.
14. Check if restricted license sought for travel to and from Alcohol Rehabilitation Program.
15. Check if restricted license sought to drive during petitioner's hours of employment.
16. Name of petitioner's employer and work location.
17. Hours of travel to and from work location.
18. Petitioner's hours of employment if travel during work hours is requested.
19. Check if travel to and from school is requested. Fill in name of school, location of school, and dates and times of travel if applicable.
20. Check if requesting medically necessary travel for petitioner, petitioner's elderly parent or person residing in the household of petitioner. One or more of the boxes must be checked to indicate if the medically necessary travel is for the petitioner or his or her elderly parent or household member. Fill in name and location of provider of medical services if applicable.

**1** (g 1-3) [ ] travel necessary to transport a minor child or children under my care  
(1)[ ] to and from school (2)[ ] to and from day care  
(3)[ ] to and from facilities housing medical service provider.

**1**

NAME AND LOCATION OF SCHOOL/DAY CARE/MEDICAL SERVICE PROVIDER

**2** (h) [ ] travel to and from court ordered visitation with my child or children.

**2**

NAME AND LOCATION OF CHILD OR CHILDREN

**3** (i-1) [ ] travel to and from appointments with my probation officer.

**3**

NAME AND LOCATION OF PROBATION ENTITY

**4** (i-2) [ ] travel to and from programs required by court or as a condition of probation.

**4**

PROGRAM NAME AND LOCATION

**5** (j) [ ] travel to and from place of religious worship.

**5**

NAME AND LOCATION OF PLACE OF RELIGIOUS WORSHIP

**5**

REQUESTED DAY (ONE DAY PER WEEK) AND TIME FOR TRAVEL TO AND FROM PLACE OF RELIGIOUS WORSHIP

**6** (k) [ ] travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as requirement of participation in a court-ordered intensive case monitoring program for child support for which I will have with me written proof of the appointment, including written proof of date and time of the appointment.

**7** (m) [ ] travel to and from jail to serve a jail sentence that is to be served on weekends or on nonconsecutive days.

I understand that the court may decide not to authorize the Department of Motor Vehicles to issue to me a restricted driver's license.

If this court does authorize the Department of Motor Vehicles to issue to me a restricted driver's license, I understand that I may not drive unless all courts that suspended my driver's license for a violation of § 46.2-301(B), specifically, driving any motor vehicle or any self-propelled machinery or equipment on any highway in Virginia after having my driver's license, learner's permit, or privilege to drive a motor vehicle suspended or revoked; after having been directed not to drive by any court or by the Commissioner; or after having been forbidden to operate a motor vehicle as required by statute or by ordinance, have authorized a restricted driver's license and until receipt of such a restricted license from the Department of Motor Vehicles.

I understand that a restricted driver's license will not permit me to operate a commercial motor vehicle.

I understand that a restricted driver's license will not authorize visitation of my child or children if visitation is otherwise prohibited.

**8**

DATE

**9**

PETITIONER'S SIGNATURE

**Data Elements, page two**

1. Check if requesting travel necessary to transport a child under the petitioner's care to and from school, to and from day care or to and from a medical service provider. If requesting such check the appropriate destination and fill in the name and location.
2. Check if requesting travel to and from court-ordered visitation with children. Fill in the names and locations of children to be visited.
3. Check if requesting travel to and from appointments with a probation officer.
4. Check if requesting travel to and from programs required by the court as a condition of probation.
5. Check if requesting travel to and from place of religious worship. Fill in name, location, and requested day (one day per week) and time of travel to and from place of religious worship.
6. Check if requesting travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive monitoring program for child support.
7. Check if requesting travel to and from jail to serve a jail sentence that is to be served on weekends or on nonconsecutive days.
8. Date form signed by petitioner.
9. Signature of petitioner.

**Using This Form**

1. Copies
  - a. Original (blue\* safety paper) – to defendant.
  - b. First copy (canary) – to court.
  - c. Second copy (white) – to Department of Motor Vehicles (DMV).
2. Prepared by clerk, signed by judge.
3. Attachments
  - a. Abstract of conviction(s) (original of DMV copy or order only).
  - b. District court form DC-210, ACKNOWLEDGEMENT OF SUSPENSION OR REVOCATION OF DRIVER'S LICENSE.
4. Preparation details
  - a. The original of this 3-part set is printed on safety paper (like bank checks) to prevent forgery and tampering. Do not try to make corrections as changes cannot be made on safety paper. If an error is made, the entire form *must* be retyped.
  - b. Data Element No. 5 – The driver's license number is used by the Virginia Department of Motor Vehicles for driver's license reissuance and records updating. The arresting officer uses it for radio records checks and matching the order to the driver's license.

\* Please note that the color of the top copy may vary, although referred to as "blue" using printing technology.

**AUTHORIZATION FOR RESTRICTED DRIVER'S LICENSE – CONVICTION FOR UNAUTHORIZED DRIVING**

Commonwealth of Virginia VA. CODE §§ 46.2-301(E), 18.2-271.1

Case No. 1

General District Court  Circuit Court  
 Juvenile and Domestic Relations District Court

2  
CITY OR COUNTY

3  
PETITIONER

4  
ADDRESS

CITY/STATE ZIP CODE

5  
DRIVER'S LICENSE NUMBER STATE

6  
DATE OF BIRTH

7  Amended Authorization

The court finds that the petitioner's privilege to drive a motor vehicle was suspended by this Court pursuant to § 46.2-301(D) for a violation of § 46.2-301(B), specifically, driving any motor vehicle or any self-propelled machinery or equipment on any highway in Virginia after having a driver's license, learner's permit, or privilege to drive a motor vehicle suspended or revoked; after having been directed not to drive by any court or by the Commissioner; or after having been forbidden to operate a motor vehicle as required by statute or by ordinance, in connection with the cases listed on the following page(s). This list is incorporated into this order by reference.

This Court:

**8**  denies the petition and the Department of Motor Vehicles is NOT authorized to issue a restricted driver's license to the above-named petitioner.

**9**  upon a showing of good cause, authorizes the Department of Motor Vehicles to issue a restricted driver's license to the above-named petitioner, for the following purposes:

- (a)  travel to or from the place of employment, as described below, by the most direct route.
- (b)  travel to and from VASAP.
- (c)  travel during the hours of employment, because the operation of a motor vehicle is necessary to the employment described below.

EMPLOYER NAME AND WORK LOCATION

HOURS FOR TRAVEL TO AND FROM WORK

HOURS OF EMPLOYMENT

(d)  travel to and from school

SCHOOL NAME AND LOCATION

DATES AND TIMES FOR TRAVEL TO AND FROM SCHOOL

(e)  medically necessary travel for  petitioner  elderly parent  person residing in petitioner's household.

NAME AND LOCATION OF PROVIDER OF MEDICAL SERVICES

(g 1-3)  travel necessary to transport a minor child or children (1)  to and from school (2)  to and from day care and/or (3)  to and from facilities housing medical service provider.

NAME AND LOCATION OF SCHOOL/DAY CARE/MEDICAL SERVICE PROVIDER

(h)  travel to and from court ordered visitation with petitioner's child or children.

NAME AND LOCATION OF CHILD OR CHILDREN

(i-1)  travel to and from appointments with petitioner's probation officer.

NAME AND LOCATION OF PROBATION ENTITY

(i-2)  travel to and from programs required by court or as a condition of probation.

PROGRAM NAME AND LOCATION

(j)  travel to and from a place of religious worship.

NAME AND LOCATION OF PLACE OF RELIGIOUS WORSHIP

AUTHORIZED DAY (ONE DAY WEEK) AND TIME OF TRAVEL TO AND FROM PLACE OF RELIGIOUS WORSHIP

(k)  travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive case monitoring program for child support for which the petitioner has with him or her written proof of the appointment, including written proof of the date and time of the appointment.

(m)  travel to and from jail to serve a jail sentence that is to be served on weekends or nonconsecutive days.

10

DATE

11

JUDGE

**NOTE: This is page one of a two-page authorization.  
Read the second page for information about this authorization.**

---

**Data Elements, page one**

1. Court case number.
2. Court jurisdiction. Check applicable type of court.
3. Name of petitioner. Insert name *as it appears on driver's license* if a restricted driver's license is authorized by the judge to be issued by DMV.
4. *Current* address of petitioner. The current address may not agree with the address shown on the driver's license.
5. Driver's license number of the petitioner and state of issuance.
6. Insert petitioner's date of birth.
7. Check this box to indicate if this is an amended authorization.
8. Check the box if the petition is denied.
9. Check the box if the petition for authorization for a restricted driver's license is granted. Check appropriate boxes below and insert information in the fields provided.
10. Date signed by the judge.
11. Judge's signature.



**AUTHORIZATION FOR RESTRICTED DRIVER'S LICENSE –  
CONVICTION FOR UNAUTHORIZED DRIVING**

**This authorization is not a restricted driver's license.**

**You must obtain a restricted driver's license from the Department of Motor Vehicles before you can operate a motor vehicle.**

Even if this Court has authorized the Department of Motor Vehicles to issue you a restricted driver's license for the suspension imposed by this Court, the Department of Motor Vehicles will not issue a restricted driver's license to you unless each court which suspended your driver's license for a violation of § 46.2-301(B), specifically, driving any motor vehicle or any self-propelled machinery or equipment on any highway in Virginia after having your driver's license, learner's permit, or privilege to drive a motor vehicle suspended or revoked; after having been directed not to drive by any court or by the Commissioner; or after having been forbidden to operate a motor vehicle as required by statute or by ordinance, has also authorized a restricted driver's license.

If you obtain a restricted driver's license, it is against the law to operate a motor vehicle in violation of any of the conditions of a restricted driver's license. **You may not operate a "commercial motor vehicle" as defined in Virginia Code § 46.2-341.4.**

You must carry this authorization, with the conditions of the authorization, with you when operating a motor vehicle, along with the restricted driver's license you obtain from the Department of Motor Vehicles.

Convictions in this court which led to suspension of your license for a violation of § 46.2-301(B), specifically, driving any motor vehicle or any self-propelled machinery or equipment on any highway in Virginia after having your driver's license, learner's permit, or privilege to drive a motor vehicle suspended or revoked; after having been directed not to drive by any court or by the Commissioner; or after having been forbidden to operate a motor vehicle as required by statute or by ordinance:

**1**

CASE NUMBER	OFFENSE	OFFENSE DATE	CONVICTION DATE
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

**2** [ ] Additional sheet attached

**Data Elements, *page two***

1. Insert case number, offense, offense date, and conviction date for all convictions in the court designated in Data Element No. 2 on page one in which the petitioner drove a motor vehicle or any self-propelled machinery or equipment on any highway in Virginia after the petitioner's driver's license, learner's permit, or privilege to drive a motor vehicle was suspended or revoked; after the petitioner was directed not to drive by any court or by the Commissioner; or after the petitioner was forbidden to operate a motor vehicle as required by statute or by ordinance in the court identified on page one, Data Element No. 2.
2. Check if additional sheet listing convictions is attached.

**Using This Form**

1. Copies
  - a. Original – to court.
  - b. Copy – to respondent.
2. Prepared by clerk, signed by judge and petitioner.
3. Preparation details

A copy of the deferred or installment payment agreement should be attached to the petition.

**PETITION AND ORDER FOR APPROVAL OF JAIL FEES PAYMENT AGREEMENT**

Commonwealth of Virginia VA. CODE §§ 46.2-320.2, 53.1-127.3

Case No. 1

HEARING DATE: 2

3 General District Court

4  
ADDRESS OF COURT

5 PETITIONER v. 8 RESPONDENT

6 ADDRESS 9 ADDRESS

7  
TELEPHONE NUMBER

Petitioner respectfully requests that this court, pursuant to Virginia Code § 53.1-127.3, approve the deferred or installment payment agreement established by the petitioner, as the respondent is unable to pay in full the jail fees owed to the petitioner pursuant to Virginia Code § 53.1-131.3. A copy of the deferred or installment payment agreement is attached hereto.

10 DATE 11 PETITIONER

**12**  Respondent  agrees  does not agree with the deferred or installment payment agreement.

13 DATE 14 RESPONDENT

**15**  **NOTICE OF HEARING (CLERK USE ONLY)**

TO: \_\_\_\_\_  
RESPONDENT

A hearing on this PETITION will be held in this court on \_\_\_\_\_  
HEARING DATE AND TIME

\_\_\_\_\_  
DATE  CLERK  DEPUTY CLERK

Copy of NOTICE OF HEARING sent to petitioner. \_\_\_\_\_  
DATE INITIALS

**ORDER**

The court grants the petition, and the deferred or installment payment agreement for fees owed to the petitioner pursuant to Virginia Code § 53.1-131.3 is

approved as submitted.

approved with the following revisions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Respondent's failure or refusal to pay in accordance with the deferred or installment agreement shall result in suspension of respondent's privilege to operate a motor vehicle pursuant to Virginia Code § 46.2-320.2.

Petition denied.

Petition dismissed.

\_\_\_\_\_  
DATE JUDGE

**Data Elements, page one**

1. Court case number.
2. Hearing date and time.
3. Court jurisdiction.
4. Court street address.
5. Name of petitioner.
6. Address of petitioner.
7. Telephone number of petitioner.
8. Name of respondent.
9. Address of respondent.
10. Date signed by petitioner.
11. Signature of petitioner.
12. Check appropriate box to indicate if respondent agrees with the deferred or installment payment agreement.
13. Date signed by respondent.
14. Signature of respondent.
15. To be completed and signed by clerk, if a hearing will be held.
16. To be completed and signed by judge.

**RETURNS: The respondent was served according to law, as indicated below, unless not found.**

Name ..... **2** .....

Address ..... **3** .....

.....

**5**  Personal Service  Tel. No. ..... **4** .....

Being unable to make personal service, a copy was delivered in the following manner:

Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.

.....  
.....

Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)

Served on the Secretary of the Commonwealth

**7**  Not found \_\_\_\_\_ **9**  
SERVING OFFICER

..... **8** ..... for ..... **10** .....  
DATE

**Data Elements, *page two***

1. Court case number.
2. Name of respondent.
3. Address of respondent.
4. Telephone number of respondent.
5. Check if personal service achieved.
6. Serving officer to check the appropriate box to designate personal service or type of substitute service. If served by leaving a copy with a family member 16 or older, insert required information.
7. Check if unable to serve process.
8. Date of service.
9. Signature of serving officer.
10. Agency or jurisdiction. Sheriff's name if served by deputy sheriff.

**Using This Form**

1. Copies
  - a. Original – to court.
  - b. Copy – to respondent.
2. Prepared by clerk, signed by judge and petitioner.
3. Preparation details
  - a. Petitioner completes Data Element Nos. 1, 3-13.
  - b. Clerk completes Data Element No. 14 if hearing will be held.
  - c. Judge completes Data Element No. 15 reflecting the ruling on the Petition.



**PETITION AND ORDER AUTHORIZING SUSPENSION  
OR NONRENEWAL OF DRIVER'S LICENSE –  
FAILURE TO PAY JAIL FEES**

Commonwealth of Virginia VA. CODE § 46.2-320.2

Case No. 1

HEARING DATE:  
2

3 General District Court

4  
ADDRESS OF COURT

5  
PETITIONER

v.

8  
RESPONDENT

6  
ADDRESS

9  
ADDRESS

7  
TELEPHONE NUMBER

10  
VIRGINIA DRIVER'S LICENSE NUMBER

Petitioner respectfully requests that this court authorize suspension or nonrenewal of respondent's Virginia driver's license pursuant to Virginia Code § 46.2-320.2. Petitioner states the following as good cause in support of this petition:

11

12  
DATE

13  
PETITIONER

**14** {  **NOTICE OF HEARING (CLERK USE ONLY)**  
TO: .....  
RESPONDENT  
A hearing on this PETITION will be held in this Court on .....  
HEARING DATE AND TIME  
.....  
DATE .....  CLERK  DEPUTY CLERK

**15** { **ORDER**  
 Based upon good cause shown, this court authorizes the suspension or nonrenewal of the respondent's Virginia driver's license until such time as the respondent has satisfied one of the following requirements: (i) paid the delinquency for jail fees owed pursuant to Virginia Code § 53.1-131.3 in full or (ii) reached an agreement with the petitioner to satisfy the delinquency within an acceptable period. Petitioner shall notify the Department of Motor Vehicles by electronic communication if the respondent satisfies such requirement. The Department of Motor Vehicles shall restore respondent's driving privilege upon receipt of said notice from the petitioner.  
 Petition denied.  
 Petition dismissed.  
.....  
DATE ..... JUDGE .....

---

**Data Elements, page one**

1. Court case number.
2. Hearing date and time.
3. Court jurisdiction.
4. Court street address.
5. Name of petitioner.
6. Address of petitioner.
7. Telephone number of petitioner.
8. Name of respondent.
9. Address of respondent.
10. Driver's license number of respondent.
11. Petitioner to insert reasons why this petition should be authorized.
12. Date of signature of petitioner.
13. Signature of petitioner.
14. To be completed and signed by clerk, if a hearing will be held.
15. To be completed and signed by judge.

**RETURNS: The respondent was served according to law, as indicated below, unless not found.**

Name ..... <b>2</b> .....	
Address ..... <b>3</b> .....	
.....	
<b>5</b> <input type="checkbox"/> Personal Service	Tel. No. .... <b>4</b> .....
<b>6</b> {	<input type="checkbox"/> Being unable to make personal service, a copy was delivered in the following manner:
	<input type="checkbox"/> Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above. ..... .....
	<input type="checkbox"/> Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)
	<input type="checkbox"/> Served on the Secretary of the Commonwealth
<b>7</b> <input type="checkbox"/> Not found	..... <b>9</b> .....
	SERVING OFFICER
..... <b>8</b> .....	..... <b>10</b> .....
DATE	

**Data Elements, page two**

1. Court case number.
2. Name of respondent.
3. Address of respondent.
4. Telephone number of respondent.
5. Check if personal service achieved.
6. Serving officer to check the appropriate box to designate personal service or type of substitute service. If served by leaving a copy with a family member 16 or older, insert required information.
7. Check if unable to serve process.
8. Date of service.
9. Signature of serving officer.
10. Agency or jurisdiction. Sheriff's name if served by deputy sheriff.

**Using This Form**

1. Copies
  - a. Original – to court.
2. Prepared by a petitioner.
3. Preparation details

The clerk inserts case number and hearing date, Data Element Nos. 1 and 2.

This form may be used by an individual whose driver's license was suspended by the Virginia Department of Motor Vehicles, or the DMV refused to renew the petitioner's driver's license for failure to pay jail fees, and the person is requesting the issuance of a restricted driver's license

**PETITION FOR RESTRICTED DRIVER'S LICENSE –  
FAILURE TO PAY JAIL FEE**

Commonwealth of Virginia VA. CODE §§ 46.2-320.2, 53.1-131.3, 18.2-271.1

..... **3** .....  
..... **4** .....  
..... PETITIONER .....  
..... **5** .....  
..... ADDRESS .....  
..... **5** .....  
..... CITY/STATE ..... ZIP .....

Case No. ..... **1** .....  
HEARING DATE: ..... **2** .....  
..... General District Court .....  
..... **6** .....  
..... DRIVER'S LICENSE NUMBER ..... STATE .....  
..... **7** .....  
..... DATE OF BIRTH .....

To the Judge of the above-named court:

The Virginia Department of Motor Vehicles has suspended or refused to renew my driver's license after receiving notice from a local correctional facility or regional jail that (i) I am delinquent in payment of fees imposed under Va. Code § 53.1-131.3 to that facility or jail, (ii) a judgment for such fees has been issued by a court, and (iii) a court has authorized the suspension or nonrenewal of my driver's license. Accordingly, I respectfully request that the court issue a restricted driver's license for a period not to exceed one year, for good cause shown, for the following purposes:

- 8**  travel to or from my place of employment.
- 9**  travel to and from VASAP.
- 10**  travel during my hours of employment, because the operation of a motor vehicle is necessary to my employment described below.

..... **11** .....  
..... EMPLOYER NAME AND WORK LOCATION .....  
..... **12** ..... **13** .....  
..... HOURS FOR TRAVEL TO AND FROM WORK ..... HOURS OF EMPLOYMENT .....

- 14**  travel to and from school. (I understand that I must provide proper written verification to the court that I am enrolled in a continuing program of education.)

..... SCHOOL NAME AND LOCATION .....  
..... REQUESTED DATES AND TIMES FOR TRAVEL TO AND FROM SCHOOL .....

- 15**  medically necessary travel for  me  elderly parent  person residing in my household. (I understand that I must provide written verification from a licensed health professional of the need for such travel for an elderly parent or household member.)

..... NAME AND LOCATION PROVIDER OF MEDICAL SERVICES .....  
**16**  travel necessary to transport a minor child under my care  to and from school  to and from day care and/or  to and from facilities housing medical service provider.  
..... NAME AND LOCATION OF SCHOOL/DAY CARE/MEDICAL SERVICES PROVIDER .....

- 17**  travel to and from court-ordered visitation with my child or children.

..... NAME(S) AND LOCATION OF CHILD OR CHILDREN .....

- 18**  travel to and from appointments with my probation officer.

..... NAME AND LOCATION OF PROBATION ENTITY .....

- 19**  travel to and from programs required by court or as conditions of probation.

..... PROGRAM NAME AND LOCATION .....

- 20**  travel to and from a place of religious place of worship.

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

..... REQUESTED DAY (ONE DAY PER WEEK) AND TIME FOR TRAVEL TO AND FROM PLACE OF RELIGIOUS WORSHIP .....

- 21**  travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive case monitoring program for child support which I will have proof of the appointment, including written proof of the date and time of the appointment.

- 22**  travel to and from jail to serve a jail sentence that is to be served on weekends or on nonconsecutive days.

I understand that the court may decide not to issue a restricted driver's license. I understand that a restricted driver's license will not permit me to operate a commercial motor vehicle. I understand that a restricted driver's license will not authorize visitation of my child or children if visitation is otherwise prohibited.

..... **23** .....  
..... DATE .....

..... **24** .....  
..... PETITIONER'S SIGNATURE .....

## FAILURE TO PAY JAIL FEE

## Data Elements

- |   |  |
|---|--|
| <ol style="list-style-type: none"> <li>1. Court case number.</li> <li>2. Hearing date and time.</li> <li>3. Court jurisdiction.</li> <li>4. Name of petitioner.</li> <li>5. Address of petitioner.</li> <li>6. Petitioner's driver's license number and state of issuance.</li> <li>7. Petitioner's date of birth.</li> <li>8. Check if requesting permission to drive to or from place of employment.</li> <li>9. Check if requesting permission to drive to and from VASAP.</li> <li>10. Check if requesting permission to drive during work hours as a necessary part of the petitioner's employment and complete Data Element Nos. 11-13.</li> <li>11. If Data Element No. 8 or 10 is checked, insert name of employer and petitioner's work location.</li> <li>12. If Data Element No. 8 is checked, insert requested times of day when travel to and from work will be authorized such as "7-8 A.M. and 5-6 P.M. Monday to Friday" if one hour is allowed for travel each way and the petitioner works 8:00 A.M. to 5:00 P.M. Monday through Friday.</li> <li>13. If Data Element No. 10 is checked, insert work schedule, such as "8:00 A.M. to 5:00 P.M. Monday to Friday" if the petitioner works 8:00 A.M. to 5:00 P.M. Monday through Friday.</li> <li>14. Check this box if requesting permission to drive to and from school and insert the school's names and the dates and times when the petitioner may drive to and from school, such as "8:00 A.M. to 9:00 A.M. and 5:00 P.M. to 6:00 P.M. Monday, Wednesday and Friday and 5:00 P.M. to 6:00 P.M. and 9:00 P.M. to 10:00 P.M. Tuesday and Thursday."</li> <li>15. If requesting permission to drive to a facility for health care services for either the petitioner, an elderly parent or person</li> </ol> | <ol style="list-style-type: none"> <li>residing in the household of the petitioner, check this box and the appropriate identifying box. Insert name and location of medical service provider.</li> <li>16. If requesting permission to transport a minor child to and from school, day care, and/or facilities housing medical service provider, check this box and the appropriate identifying box. Insert the name(s) of the school, day care, and/or facilities housing medical service provider.</li> <li>17. If requesting permission to travel to and from court-ordered visitation, check this box and provide the names of the children and the location of the children.</li> <li>18. If requesting permission to travel to and from appointments with a probation officer, check this box and enter the name of the probation entity and the location.</li> <li>19. If requesting permission to travel to and from programs required by the court or as a condition of probation, check this box and enter the name and location of the program.</li> <li>20. If requesting permission to travel to and from a place of religious worship, check this box and enter the name and location of the place of religious worship.</li> <li>21. If requesting permission to travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive monitoring program for child support, check this box.</li> <li>22. If requesting permission to travel to and from jail to serve a jail sentence that is to be served on weekends or on nonconsecutive days, check this box.</li> <li>23. Date of entry of petition.</li> <li>24. Signature of petitioner.</li> </ol> |
|---|--|

**Using This Form**

1. Copies
  - a. Original (safety paper) – to petitioner.
  - b. First copy (canary) – to Department of Motor Vehicles.
  - c. Second copy (white) – to court.
2. Prepared by clerk, signed by judge and petitioner.
3. Preparation details
  - a. This form is for use when a petition for a restricted license has been received from an individual who has or may have his privilege to drive suspended for failing to pay jail fee.
  - b. The original of this four-part form is printed on safety paper (like bank checks) to prevent forgery and tampering. Do not try to make corrections as changes cannot be made on safety paper. If an error is made, the entire form must be re-typed.
  - c. This is a three-page form. The second and third pages to be used with this form is designated as district court form DC-261, RESTRICTED LICENSE ORDER.
  - d. Data Element No. 5 – The identification information in this format is found in all warrants and summonses used for abstracting purposes. It is used to identify the individual who is driving solely on this order pending a re-issuance of his driver's license by the Virginia Department of Motor Vehicles and verify that the date of birth agrees with the birth date shown on the driver's license, if the license is surrendered. Petitioner will provide all of this information on the DC-281.
  - e. Data Element Nos. 6 and 7 – The driver's license number is used by the Virginia Department of Motor Vehicles for driver's license re-issuance and records updating. It is not necessarily identical to the social security number, and both numbers should be shown if they are different. If the petitioner does not have a valid driver's license, or is ineligible for some reason other than child support delinquency, a restricted license should not be issued.



**RESTRICTED DRIVER'S LICENSE ORDER —**

Case No. **1**

**FAILURE TO PAY JAIL FEE**

Commonwealth of Virginia Va. Code §§ 46.2-320.2, 53.1-131.3, 18.2-271.1

**2**  
.....  
CITY/COUNTY

General District Court **5**

**7**  
[ ] Original Order  
[ ] Amended Order

**3**  
.....  
PETITIONER

COMPLETE DATA BELOW IF KNOWN									
RACE	SEX	BORN			HT.		WGT.	EYES	HAIR
		MO.	DAY	YR.	FT.	IN.			
.....									
D.L.#							STATE		
<b>6</b>									

**4**  
.....  
ADDRESS

.....  
CITY STATE ZIP

You have advised that the Virginia Department of Motor Vehicles has suspended or refused to renew your driver's license after receiving notice from a local correctional facility or regional jail that (i) you are delinquent in payment of fees imposed under Va. Code § 53.1-131.3 to that facility or jail, (ii) a judgment for such fees has been issued by a court, and (iii) a court has authorized the suspension or nonrenewal of your driver's license. You have petitioned the court to issue a restricted driver's license for a period not to exceed one year, for good cause shown, pursuant to Va. Code § 46.2-320.2.

- 8** [ ] No restricted license privilege is granted to you by this ORDER.
- [ ] The court has determined that good cause was shown to warrant an exception to the statutory suspension of your driver's license so as to permit the issuance of a restricted license order. Accordingly, a restricted license is authorized for the purposes enumerated on the second and third pages of this ORDER and subject to the conditions below.

**CONDITIONS OF RESTRICTED LICENSE: This ORDER is entered and the restricted license is to be issued upon the following conditions:**

- (1) This privilege is subject to any other conditions, restrictions, suspensions or revocations imposed by any court of competent jurisdiction or the Virginia Department of Motor Vehicles. If your license is suspended for other reasons, the privileges of this license may be VOID and the Department of Motor Vehicles may refuse to issue you a restricted license.**
- You shall immediately notify this court and the Virginia Department of Motor Vehicles of any change of residential address; or any change to any of the information listed in items "a" through "m" on pages two and three of this ORDER.
- 9** ..... Commencement date of restricted license privilege. This privilege EXPIRES 60 DAYS from this date if this ORDER is not accompanied by a restricted license issued by the Virginia Department of Motor Vehicles or by your home state license if you are not a Virginia resident.
- 10** ..... Expiration date of this restricted driver's license Order unless withdrawn or modified by this court.
- The suspension of your full driving privileges will not be lifted until the local correctional facility or regional jail notifies the Virginia Department of Motor Vehicles that you have either (i) paid the delinquency in full or (ii) reached an agreement with the local correctional facility or regional jail to satisfy the delinquency within an acceptable period.
- You shall carry ALL THREE PAGES of this ORDER, and any attachment, at all times while operating a motor vehicle until this restricted license expires.

**11** [ ] Please see reverse side for other applicable conditions.

**WARNING:** Forging or altering this Order or possessing a forged or altered order is a separate criminal offense punishable by fines and incarceration. Va. Code §§ 18.2-107, 18.2-168, 18.2-169. Driving outside of these restricted privileges constitutes a separate criminal offense.

**NOTE: This is page one of a three-page order**

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**Data Elements, front, page one**

1. Court case number.
2. Court jurisdiction.
3. Name of person requesting restricted driver's license.
4. Petitioner's address.
5. Information describing petitioner.
6. Petitioner's Virginia driver's license number.
7. Check appropriate box to indicate if this is an original or amended order.
8. Check the appropriate box to indicate if a restricted driver's license is being issued.
9. If a restricted driver's license is being issued, enter commencement date of restricted license privilege.
10. If a restricted driver's license is being issued, enter the expiration date of restricted license privilege.
11. Check if there are other conditions listed on the reverse side other than the terms on the second and third pages of the order.

Other applicable conditions:

**1**

.....

.....

.....

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.....

.....

**Data Elements, *reverse, page one***

1. List other applicable conditions other than the terms on the second and third pages of the Order.

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**Using This Form**

1. Copies
  - a. Original – to court.
  - b. First copy – to Petitioner (DCSE).
  - c. Second copy – to Respondent/Obligor.
  - d. Third copy – to DMV if license is suspended.
2. Prepared by clerk, signed by DCSE representative and judge.
3. Attachments – order of support pursuant to which suspension/revocation is sought (if provided by petitioner).
4. Preparation details
  - a. This form is designed for use by the Department of Social Services, Division of Support Enforcement (DCSE) to ask courts which have entered or are enforcing support orders to suspend or refuse to renew the driver's license of persons delinquent either by 90 days or by \$5,000. It is not intended for use by non-DCSE petitioners.
  - b. A restricted driver's license may be issued to the obligor by the juvenile and domestic relations district court of the jurisdiction where the obligor resides.

**PETITION AND ORDER TO SUSPEND DRIVER'S LICENSE –  
FAILURE TO PAY CHILD SUPPORT**

Commonwealth of Virginia  
VA. CODE § 46.2-320.1

Case No. ..... **1**  
DCSE Case No. .... **2**  
HEARING DATE:  
..... **3**  
.....

..... **4** ..... Court  
..... **5** .....  
ADDRESS OF COURT

Department of Social Services ..... **6** ..... v. .... **9** .....  
PETITIONER RESPONDENT/OBLIGOR  
..... **6** ..... **10** .....  
ADDRESS ADDRESS  
.....  
..... **7** ..... **11** .....  
CASE MANAGER SSN  
..... **8** ..... **12** .....  
TELEPHONE NUMBER VIRGINIA DRIVER'S LICENSE NUMBER (IF DIFFERENT FROM SSN)

Petitioner respectfully requests that this court find that the respondent (i) is delinquent in the payment of child support by 90 days or more, or in the amount of \$5,000 or more, and that this delinquency constitutes willful non-compliance with the order of support identified below or (ii) has failed to comply with a subpoena, summons or warrant relating to paternity or child support proceedings. Petitioner respectfully requests this court to authorize the suspension or refusal to renew of respondent's Virginia driver's license pursuant to Virginia Code § 46.2-320.1.

..... **13** ..... **14** .....  
NAME OF OBLIGEE COURT ISSUING SUPPORT ORDER  
..... **15** ..... **16** .....  
DATE ORDER ENTERED DATE OF LAST SUPPORT PAYMENT  
..... **17** ..... **18** ..... Per [ ] week [ ] month  
AMOUNT OF ARREARAGE AMOUNT OF PERIODIC SUPPORT PAYMENT  
..... **19** ..... **20** .....  
DATE PETITIONER

**ORDER**

**21**  The court finds that the obligor is delinquent in the payment of child support by 90 days or more, or in an amount of \$5,000 or more, and that obligor's noncompliance with the child support order was willful or that petitioner has failed to comply with a subpoena, summons or warrant relating to paternity or child support proceedings. Therefore, the court grants the petition to authorize the suspension or refusal to renew of the respondent's driver's license until such time as respondent has either (i) paid the delinquency in full, (ii) reached an agreement with petitioner to pay such delinquency within a period not to exceed ten years and has made at least one payment, representing at least five percent of the total delinquency or \$600, whichever is greater, (iii) complied with the subpoena, summons or warrant, or (iv) completed or is successfully participating in an intensive case monitoring program for child support ordered by a juvenile and domestic relations district court for noncustodial parents, as determined by the court. Petitioner shall notify the Department of Motor Vehicles if the respondent satisfies such requirement. The Department of Motor Vehicles shall restore respondent's driving privilege upon receipt of said notice from petitioner.

Petition denied.

..... **22** ..... **23** .....  
DATE JUDGE

---

**Data Elements**

1. Court case number.
2. DCSE case number.
3. Hearing date and time.
4. Name of court.
5. Address of court.
6. Jurisdiction and address of DCSE office seeking license suspension.
7. Name of DCSE case manager handling the case.
8. Case manager's telephone number.
9. Name of respondent whose license suspension is sought.
10. Address of respondent
11. Social security number of respondent.
12. Respondent's Virginia driver's license number if different from Data Element No. 11.
13. Name of person to whom support is owed by respondent.
14. Name of the court which has issued a support order against the respondent.
15. Date the support order was entered.
16. Date on which respondent last made a payment under the order referenced in Data Element Nos. 13-15.
17. Dollar amount of arrearage alleged to be owed by respondent.
18. Dollar amount of periodic support payment. Check applicable box.
19. Date form signed by DSS representative.
20. Signature of DSS representative.
21. Check appropriate box.
22. Date order entered by judge.
23. Judge's signature.

**Using This Form**

1. Copies
  - a. Original – to court.
2. Prepared by petitioner. Clerk inserts case number and hearing date, Data Element Nos. 1 and 2.
3. Attachments
  - a. District court form DC-280, PETITION AND ORDER TO SUSPEND DRIVER'S LICENSE – FAILURE TO PAY CHILD SUPPORT (if provided by petitioner).
  - b. Copy of Notice to Suspend Driver's License from Department of Social Services (if provided by petitioner).
  - c. Notice from DMV that petitioner's license has been suspended for failure to pay child support (if provided by petitioner).
4. Preparation details
  - a. This form may be used by an individual who has received a notice from the Department of Social Services that his license will be suspended for failure to pay child support or who has had his license suspended by a court for the same reason. The petitioner is not required to wait until his license is actually suspended before he applies to the juvenile and domestic relations district court for a Restricted Driver's License Order.
  - b. The petitioner may not ask for the privilege to drive to and from visitation with his/her children if such visitation is otherwise prohibited.
  - c. Data Element No. 1 – If petitioner can provide DCSE case number, it is advisable to add this number to the form.



**PETITION FOR RESTRICTED DRIVER'S LICENSE  
FAILURE TO PAY CHILD SUPPORT**

Commonwealth of Virginia VA. CODE § 46.2-320.1, 18.2-271.1

Case No. 1

HEARING DATE: 2

Juvenile and Domestic Relations District Court

3

4  
PETITIONER

5  
DRIVER'S LICENSE NUMBER

STATE

6  
ADDRESS

7  
DATE OF BIRTH

CITY/STATE

ZIP

To the Judge of the above-named court:

I have received from the Department of Social Services notice of intent to suspend or to refuse to renew my driver's license for failure to pay child support or failure to comply with process relating to a paternity or child support proceeding. Accordingly, I respectfully request that the court issue a restricted driver's license, for good cause shown, for the following purposes:

- 8** [ ] travel to or from my place of employment.
- 9** [ ] travel to and from VASAP.
- 10** [ ] travel during my hours of employment, because the operation of a motor vehicle is necessary to my employment described below.

11

EMPLOYER NAME AND WORK LOCATION

12

HOURS FOR TRAVEL TO AND FROM WORK

13

HOURS OF EMPLOYMENT

- 14** [ ] travel to and from school. (I understand that I must provide proper written verification to the court that I am enrolled in a continuing program of education.)

14

SCHOOL NAME AND LOCATION

REQUESTED DATES AND TIMES FOR TRAVEL TO AND FROM SCHOOL

- 15** [ ] medically necessary travel for [ ] me [ ] elderly parent [ ] person residing in my household. (I understand that I must provide written verification from a licensed health professional of the need for such travel for an elderly parent or household member.)

15

NAME AND LOCATION OF PROVIDER OF MEDICAL SERVICES

- 16** [ ] travel necessary to transport a minor child under my care [ ] to and from school [ ] to and from day care and/or [ ] to and from facilities housing medical service provider.

16

NAME AND LOCATION OF SCHOOL/DAY CARE/MEDICAL SERVICE PROVIDER

- 17** [ ] travel to and from court ordered visitation with my child or children.

17

NAME AND LOCATION OF CHILD OR CHILDREN

- 18** [ ] travel to and from appointments with my probation officer.

18

NAME AND LOCATION OF PROBATION ENTITY

- 19** [ ] travel to and from programs required by court or as a condition of probation.

19

PROGRAM NAME AND LOCATION

- 20** [ ] travel to and from a place of religious worship.

20

NAME AND LOCATION OF PLACE OF RELIGIOUS WORSHIP

20

REQUESTED DAY (ONE DAY PER WEEK) AND TIME FOR TRAVEL TO AND FROM PLACE OF RELIGIOUS WORSHIP

- 21** [ ] travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive care monitoring program for child support which I will have written proof of the appointment, including written proof of the date and time of the appointment.

- 22** [ ] travel to and from jail if serving jail sentence that is to be served on weekends or on nonconsecutive days.

I understand that the court may decide not to issue a restricted driver's license. I understand that a restricted driver's license will not permit me to operate a commercial motor vehicle. I understand that a restricted driver's license will not authorize visitation of my child or children if visitation is otherwise prohibited.

23

DATE

24

PETITIONER'S SIGNATURE

**Form DC-281      PETITION FOR RESTRICTED DRIVER'S LICENSE –      Form DC-281**  
**FAILURE TO PAY CHILD SUPPORT**

---

**Data Elements**

1. Court case number.
2. Hearing date and time.
3. Court name.
4. Name of individual requesting a restricted license.
5. Petitioner's driver's license number and issuing state.
6. Petitioner's address.
7. Petitioner's date of birth.
8. Check if restricted license sought to travel to and from petitioner's employment.
9. Check if restricted license sought for travel to and from Alcohol Rehabilitation Program.
10. Check if restricted license sought to drive during petitioner's hours of employment.
11. Name of petitioner's employer and work location.
12. Hours of travel to and from work location.
13. Petitioner's hours of employment if travel during work hours is requested.
14. Check if travel to and from school is requested. Fill in name of school, location, and dates and time of travel if applicable.
15. Check if requesting medically necessary travel for petitioner, petitioner's elderly parent or person residing in the household of petitioner. One or more of the boxes must be checked to indicate if the medically necessary travel is for the petitioner of his or her elderly parent or household member. Fill in name and location of provider of medical services if applicable.
16. Check if requesting travel necessary to transport a child under the petitioner's care to and from school, to and from day care or to and from a medical service provider. If requesting such check the appropriate destination and fill in the name and location.
17. Check if requesting travel to and from court-ordered visitation with children. Fill in the names and locations of children to be visited.
18. Check if requesting travel to and from appointments with a probation officer.
19. Check if requesting travel to and from programs required by the court as a condition of probation.
20. Check if requesting travel to and from place of religious worship. Fill in name, location, and requested day (one day per week) and time of travel to and from place of religious worship.
21. Check if requesting travel to and from appointments approved by the Division of Child Support Enforcement of the Department of Social Services as a requirement of participation in a court-ordered intensive monitoring program for child support.
22. Check if requesting travel to and from jail if serving jail sentence to be served on weekends and nonconsecutive days.
23. Date form signed by petitioner.
24. Signature of petitioner.

---

**Using This Form**

1. Copies
  - a. Original (safety paper) – to petitioner.
  - b. First copy (canary) – to Department of Motor Vehicles.
  - c. Second copy (white) – to court.
  - d. Third copy (green) – to Division of Child Support Enforcement of the Virginia Department of Social Services.
2. Prepared by clerk, signed by judge and petitioner.
3. Preparation details
  - a. This form is for use when a petition for a restricted license has been received from an individual who has or may have his privilege to drive suspended for failing to pay child support.
  - b. The original of this four-part form is printed on safety paper (like bank checks) to prevent forgery and tampering. Do not try to make corrections as changes cannot be made on safety paper. If an error is made, the entire form must be re-typed.
  - c. This is a three-page form. The second and third pages to be used with this form is designated as district court form DC-261, RESTRICTED LICENSE ORDER.
  - d. Data Element No. 6 – The identification information in this format is found in all warrants and summonses used for abstracting purposes. It is used to identify the individual who is driving solely on this order pending a re-issuance of his driver's license by the Virginia Department of Motor Vehicles and verify that the date of birth agrees with the birth date shown on the driver's license, if the license is surrendered. Petitioner will provide all of this information on the DC-281.
  - e. Data Element Nos. 7 and 8 – The driver's license number is used by the Virginia Department of Motor Vehicles for driver's license re-issuance and records updating. It is not necessarily identical to the social security number, and both numbers should be shown if they are different. If the petitioner does not have a valid driver's license, or is ineligible for some reason other than child support delinquency, a restricted license should not be issued.
  - f. Data Element No. 2 – This information may be provided by the petitioner and should be inserted if known at the time of the issuance of the Restricted Driver's License.

**RESTRICTED DRIVER'S LICENSE ORDER —  
FAILURE TO PAY CHILD SUPPORT**

Commonwealth of Virginia Va. Code §§ 46.2-320.1, 18.2-271.1

Case No. ..... **1** .....

DCSE Case No. .... **2** .....

- Circuit Court
- Juvenile and Domestic Relations District Court

..... **3** .....  
CITY/COUNTY

..... **4** .....  
PETITIONER

..... **5** .....  
ADDRESS

..... CITY STATE ZIP

**6**

COMPLETE DATA BELOW IF KNOWN

RACE	SEX	BORN			HT.		WGT.	EYES	HAIR
		MO.	DAY	YR.	FT.	IN.			
..... <b>7</b> .....									
D.L.#								STATE	

- 8** Original Order
- Amended Order

You have advised the court of receipt of notice of intent to suspend or refusal to renew your driver's license for failure to pay child support or failure to comply with process relating to paternity or child support proceedings, and have petitioned the court to issue a restricted driver's license for good cause shown pursuant to Va. Code § 46.2-320.1.

- 9**  No restricted license privilege is granted to you by this ORDER.
- The court has determined that there are compelling circumstances warranting an exception to the statutory suspension of your driver's license which permit the issuance of a restricted license order. Accordingly, a restricted license is authorized for the purposes enumerated on the second and third pages of this ORDER and subject to the conditions below.

**CONDITIONS OF RESTRICTED LICENSE: This ORDER is entered and the restricted license is to be issued upon the following conditions:**

- (1) **This privilege is subject to any other conditions, restrictions, suspensions or revocations imposed by any court of competent jurisdiction or the Virginia Department of Motor Vehicles. If your license is suspended for other reasons, the privileges of this license may be VOID and the Department of Motor Vehicles may refuse to issue you a restricted license.**
  - (2) You shall immediately notify this court, the Virginia Department of Motor Vehicles, and the Virginia Department of Social Services of any change of residential address; or any change to any of the information listed in items "a" through "m" on pages two and three of this ORDER.
  - (3) ..... **10** ..... Commencement date of restricted license privilege. This privilege EXPIRES 60 DAYS from this date if this ORDER is not accompanied by a restricted license issued by the Virginia Department of Motor Vehicles or by your home state license if you are not a Virginia resident.
  - (4) The suspension of your full driving privileges will not be lifted until the Department of Social Services certifies to the Department of Motor Vehicles that you have either (i) paid the delinquency in full, (ii) reached an agreement with the Department of Social Services to satisfy the delinquency within a period not to exceed ten years and have made at least one payment pursuant to an agreement with the Department of Social Services, (iii) complied with a subpoena, summons or warrant relating to a paternity or child support proceeding, or (iv) completed or is successfully participating in an intensive case monitoring program for child support ordered by a juvenile and domestic relations district court for noncustodial parents, as determined by the court.
  - (5) You shall carry ALL THREE PAGES of this ORDER, and any attachment, at all times while operating a motor vehicle until this restricted license expires.
- 11**  Please see reverse side for other applicable conditions.

**WARNING:** Forging or altering this Order or possessing a forged or altered order is a separate criminal offense punishable by fines and incarceration. Va. Code §§ 18.2-107, 18.2-168, 18.2-169. Driving outside of these restricted privileges constitutes a separate criminal offense.

**NOTE: This is page one of a three-page order**

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**Data Elements, front, page one**

1. Court case number.
2. Number assigned by DCSE to support case, if known.
3. Court jurisdiction. Check applicable box to indicate court.
4. Name of person requesting restricted driver's license.
5. Petitioner's address.
6. Information describing petitioner.
7. Petitioner's Virginia driver's license number.
8. Check appropriate box to indicate if this is an original or amended order.
9. Check the appropriate box to indicate if a restricted driver's license is being issued.
10. If a restricted driver's license is being issued, enter commencement date of restricted license privilege.
11. Check if there are other conditions listed on the reverse side other than the terms on the second and third pages of the order.

Other applicable conditions:

1

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.....

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.....

.....

.....

**Data Elements, *reverse, page one***

1. List other applicable conditions other than the terms on the second and third pages of the Order.

**Using This Form**

1. Copies
  - a. Original – to court.
  - b. First copy – to defendant.
2. Prepared by Virginia Department of Transportation or toll facility operator or Authority.
3. Attachments – none.
4. Preparation details

A separate form should be used for each defendant; however, multiple cases for that one defendant can be included on the same form.





**Data Elements**

1. Name of court.
2. Name of complainant.
3. Date a copy mailed to or served on defendant.
4. Date of signature.
5. Signature of Virginia Department of Transportation official or toll facility operator or Authority official. Check the appropriate box below signature line to indicate agency.
6. Name of defendant.
7. Court case number(s).
8. Offense date(s).
9. Trial date(s).
10. Check box if additional page(s) attached.

---

**Using This Form**

1. Copies
  - a. Original – to court.
  - b. First copy – to defendant.
  - c. Second copy – to party initiating action.
2. Attachments
  - a. Copy of invoice or other bill for unpaid tolls, and proof of mailing, to the registered owner of a motor vehicle is required for court proceeding on violation of § 46.2-819.1.
3. Preparation details
  - a. The Virginia Department of Transportation or a toll road facility operator may issue the summons for an individual who fails to pay a toll. The Metropolitan Washington Airports Authority, as the operator of the Dulles Access Highway, may issue the summons for an individual who uses the Dulles Access Highway in violation of the Authority's regulation regarding usage. When a registered owner of a vehicle, if summoned based upon photo or automatic vehicle identification systems, is not the operator, the registered owner may file an affidavit with the court at least 14 days before the hearing, and the court shall issue a SUMMONS FOR TOLL ROAD OR DESIGNATED ACCESS HIGHWAY VIOLATION to the alleged operator.
  - b. Jurisdiction lies in the general district court of the city or county in which the toll facility is located or in which the Dulles Access Highway violation occurred pursuant to Virginia Code §§ 46.2-819.1, 46.2-819.3 or 46.2-819.5 regardless of whether the registered owner or operator of the vehicle is a juvenile. Civil penalties are based upon the number of previous violations with a certain number of years.

SUMMONS FOR TOLL ROAD OR DESIGNATED ACCESS HIGHWAY VIOLATION

Commonwealth of Virginia

VA. CODE §§ 46.2-819.1; -819.3, -819.3:1, -819.5

1

CITY OR COUNTY

General District Court

2

STREET ADDRESS OF COURT

3 [ ] TO ANY AUTHORIZED OFFICER: Summon the Defendant as provided below: TO THE DEFENDANT: You are commanded to appear before this Court on

4

RETURN DATE AND TIME

NOTICE OF CHARGE AND CLAIM:

5 That defendant, [ ] registered owner [ ] operator, while operating a vehicle identified as follows:

(INCLUDE LICENSE PLATE NUMBER LICENSE PLATE/TYPE STATE)

6 has violated Virginia Code § [ ] 46.2-819.1 (use of toll facility without payment) [ ] 46.2-819.3 (failure to pay, as promised, an unpaid toll) [ ] 46.2-819.3:1 (failure to pay, automatic vehicle identification system), or [ ] 46.2-819.5 (improper use of Dulles Access Highway)

namely, NAME OF TOLL FACILITY/OR DESIGNATED ACCESS HIGHWAY located in CITY OR COUNTY on DATE AND TIME

and that the following amounts are due and owing:

\$ 7 for unpaid toll(s); and \$ 8 administrative fee(s); and

\$ 9 civil penalty, based upon offense(s) within years.

10 [ ] All required notices, invoices and bills have been given.

11

DATE

12

[ ] VIRGINIA DEPARTMENT OF TRANSPORTATION [ ] TOLL FACILITY OPERATOR OR AUTHORITY [ ] CLERK [ ] MAGISTRATE

CASE DISPOSITION

13 [ ] The defendant was this day [ ] tried in absence [ ] present.

14 [ ] The defendant [ ] is [ ] is not the owner of the vehicle.

15 [ ] The defendant [ ] is [ ] is not the operator of the vehicle.

16 [ ] The vehicle described herein is the vehicle which use the toll facility without payment or improperly used the Dulles Access Highway, such violation being committed by the defendant [ ] named registered owner [ ] named operator of the vehicle who has [ ] unpaid tolls [ ] improperly used the Dulles Access Highway and therefore, the defendant is ordered to pay the following amounts:

\$ unpaid toll(s); and \$ administrative fee(s); and

\$ civil penalty, based upon offense(s) within years.

17 [ ] This Summons is hereby dismissed.

18 [ ] The defendant did not appear and therefore, the Summons shall be executed by the sheriff.

19 [ ] Other:

20

DATE

21

JUDGE

CASE NO.

22

[ ] Virginia Department of Transportation

[ ] NAME OF TOLL FACILITY OPERATOR OR AUTHORITY

v.

24

DEFENDANT NAME (LAST, FIRST, MIDDLE)

Mailing address [ ] same as above

25

Table with columns: RACE, SEX, MO., BORN DAY, YR., HT. FT., IN., WGT, EYES, HAIR

SSN 27

DL# STATE

Attorney for Toll Facility or Authority

28

Attorney for Defendant

29

Offense Tracking Number:

30

DISABILITY ACCOMMODATIONS for loss of vision, hearing, mobility, etc., contact the court ahead of time.

HEARING DATE AND TIME

31

COSTS

460 FIXED TRAFFIC INFRACTION FEE

121 T.I.A. FEE 32

137 TIME TO PAY

228 COURTHOUSE CONSTRUCTION FEE

244 COURTHOUSE SECURITY FEE

33

243 LOCAL TRAINING ACADEMY FEE

161 CIVIL PENALTY/ ADMIN COSTS/ UNPAID TOLL

222 CIVIL PENALTY/ ADMIN COSTS/ UNPAID TOLL

OTHER (SPECIFY)

\$ 34

TOTAL

\$ 35

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**Data Elements, page one**

---

1. Court name.
2. Address of court.
3. Check box if summons is to be served by an authorized serving officer.
4. Hearing date and time.
5. Check appropriate box and insert vehicle identifiers in the field below.
6. Check appropriate box. Insert name and location of the toll facility or designated Access Highway and date and time of the defendant's use of a toll facility without payment or the defendant's improper use of the designated Access Highway.
7. Insert amount of unpaid toll(s).
8. Insert total administrative fee(s) to recover expenses of collecting unpaid toll(s), or in the case of the Dulles Access Highway, collecting the civil penalty.
9. Insert civil penalty calculated based upon number of offense(s) within a one-, two-, or three-year period.
10. Check box to indicate that all required notices, invoices and bills have been given.
11. Date issued.
12. Signature of issuer. Check appropriate box to indicate title of issuer.
13. Check applicable box to indicate whether defendant was present.
14. Check applicable box to indicate whether defendant was the owner of the vehicle.
15. Check applicable box to indicate whether defendant was the operator of the vehicle.
16. Check if the court finds against the defendant and check other applicable boxes. Enter amount of any unpaid toll(s), administrative fee(s), and civil penalty to be paid by the defendant.
17. Check if the charge and claim are dismissed.
18. Check if the defendant failed to appear on the return date on the mailed summons.
19. Check box and enter any other disposition.
20. Date of entry of order.
21. Signature of judge.
22. Court case number.
23. Check box, and insert name and address of party initiating action, if applicable.
24. Name and address of defendant.
25. Check box if defendant's address also serves as defendant's mailing address. Space has been provided for defendant's mailing address if different from defendant's address.
26. Fill in physical characteristics of defendant, if known.
27. Enter defendant's social security number, driver's license number and issuing state, if known.
28. Name, address, and phone number of toll facility's attorney, or attorney for the Metropolitan Washington Airports Authority.
29. Name, address, and phone number of defendant's attorney.
30. Insert offense tracking number.
31. Space has been provided for insertion of continuance dates.
32. Insert the appropriate fixed traffic infraction fee.
33. Insert appropriate additional costs.
34. Insert other fees, costs, etc. not listed above.
35. Insert total fines, fees, and costs.

To the Registered Owner of the Vehicle Described in this SUMMONS:

If you are the registered owner of the vehicle described on the front side of this SUMMONS, but you were not operating the vehicle on the date the vehicle is alleged to have used the toll facility without payment pursuant to Virginia Code § 46.2-819.1, or § 46.2-819.3:1, or improperly used the Dulles Access Highway pursuant to § 46.2-819.5, then you may complete the Affidavit below and a separate SUMMONS will be issued for the operator of the vehicle and file the Affidavit with the court at least 14 days prior to the hearing date.

NOTE:

- Even if you file the Affidavit with the court to have a separate SUMMONS issued for the operator of the vehicle, you are still required to appear in court in response to this SUMMONS. Failure to appear could result in action against you.
The Affidavit procedure may only be used if the alleged violation is under Virginia Code § 46.2-819.1, § 46.2-819.3:1, or § 46.2-819.5, not § 46.2-819.3 (failure to pay, as promised, an unpaid toll within a specified period). Consult the front side of this form in the Notice of Charge section that applies.
The Affidavit must be filed with the court at least 14 days prior to the hearing date, or a SUMMONS cannot not be issued to the operator of the vehicle in time for the hearing.
If you were not driving the vehicle on the date of the alleged violation and the car was stolen at that time, you must bring a certified copy of the police report stating that the vehicle was stolen when the alleged violation occurred.

RETURN: The defendant was served according to law, as indicated below, unless not found.

Form section for returning the summons, including fields for Name (1), Address (2), Personal Service (3), Being unable to make personal service (4), Delivered to family member (5), Not found (6), Serving Officer (7), Clerk's Office Use Only (10-11), Copy of summons and affidavit sent to (12), Name of Toll Facility or Authority (13), Penalty, fee and unpaid toll remanded to (15), Date (17), and Clerk Initials (18).

AFFIDAVIT: I am the registered owner of the vehicle described on the front side of this SUMMONS. I hereby affirm that I was not the driver of the vehicle on the date of the alleged violation and that the vehicle was operated on that date by (19) LEGAL NAME OF OPERATOR. Operator of vehicle is under 18 years of age (20) ADDRESS OF OPERATOR. (21) DATE (22) SIGNATURE OF REGISTERED OWNER OF VEHICLE. (23) TELEPHONE NUMBER (24) PRINTED NAME OF AFFIANT. The above-named affiant personally appeared this day before the undersigned, and upon duly being sworn, made oath that the facts stated in this affidavit are true to the best of his or her knowledge, information and belief. (25) DATE (26) [ ] CLERK [ ] DEPUTY CLERK [ ] NOTARY PUBLIC My Commission expires: (27)

I certify that I mailed by first-class mail a copy of this SUMMONS to the defendant at the address therein on (28) DATE (29) [ ] TOLL ROAD FACILITY OPERATOR [ ] VIRGINIA DEPARTMENT OF TRANSPORTATION

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**Data Elements, page two**

1. Name of person to be summoned. If person is a corporation's officer, designated agent, managing employee or registered agent, show name of corporation on second line.
2. Address and telephone number of person to be summoned.
3. Check this box if personal service obtained.
4. Serving officer to check the appropriate box to designate type of substituted service.
5. If served by leaving the summons with a family member age 16 or older, check appropriate box and insert required information.
6. Check this box if unable to serve process.
7. Signature of serving officer.
8. Date of signature.
9. Name of sheriff if served by deputy sheriff.
10. Date of receipt of affidavit of registered owner of vehicle.
11. Clerk's initials.
12. Check appropriate box to indicate copy of summons and affidavit delivered to party initiating action.
13. Date copy of summons and affidavit sent to party initiating action.
14. Clerk's initials.
15. Check box if unpaid toll(s) are included in the funds being remanded.
16. Check appropriate box to indicate remand of penalties, fees, and unpaid tolls assessed to appropriate agent based on the identity of the party initiating action.
17. Date penalties, fees, and unpaid tolls remanded.
18. Clerk's initials.
19. Insert legal name of operator of motor vehicle alleged to have used a toll facility without payment or to have used the Dulles Access Highway improperly.
20. Insert address of operator of motor vehicle alleged to have used a toll facility without payment or to have used the Dulles Access Highway improperly.
21. Date of signing of affidavit.
22. Signature of affiant-registered owner.
23. Telephone number of affiant-registered owner.
24. Printed name of affiant-registered owner.
25. Date of acknowledgment.
26. Signature of person taking the acknowledgement. Check the applicable title box.
27. If acknowledgment taken by notary public, insert date of expiration of commission, notary's registration number and location of notarization.
28. Date on which a copy of Summons was mailed by first-class mail to defendant.
29. Signature of person who mailed copy of Summons to defendant. Check the appropriate box to indicate agency.

**Using This Form**

1. Copies
  - a. Original – to court.
  - b. Copies – as dictated by local practice.
2. Preparation – by complaining party, judge or clerk.
3. Attachments – as directed by local practice.
4. Preparation details
  - a. Data Element No. 16 – Fill in only those boxes for which information is known at the time of issuance with reasonable certainty. All of these elements are used in interstate criminal information exchanges.
  - b. If the driver’s license is suspended as part of a conviction of driving while intoxicated (Va. Code § 18.2-266) and a RESTRICTED LICENSE ORDER AND ENTRY INTO ALCOHOL REHABILITATION PROGRAM, Form DC-265, is entered, the box for “driver’s license suspended” should be checked, along with the “restricted driver’s license” box.
  - c. Fines and Costs, accounting code numbers printed next to expenses are for bookkeeping purposes.



DISPOSITION ORDER—UNIFORM SUMMONS

Summons No. 1 Case No. 2

Hearing Date and Time

24

NAME OF COURT

The Accused this day:

25 [ ] tried in absence [ ] present [ ] with parent/legal guardian

[ ] PROSECUTING ATTORNEY PRESENT (NAME)

[ ] DEFENDANT'S ATTORNEY PRESENT (NAME)
[ ] NO ATTORNEY [ ] ATTORNEY WAIVED
[ ] If convicted, no jail sentence will be imposed.

27 [ ] INTERPRETER PRESENT

Plea of Accused: [ ] Waived trial and prepaid fines and costs pursuant to Rule 3:B/3:C

28 [ ] Nolo Contendere [ ] Guilty [ ] Plea voluntary and intelligently entered after the defendant was apprised of his right against compulsory self-incrimination and his right to confront the witness against him.
[ ] Not Guilty [ ] Witnesses Sworn
[ ] Plea and Recommendation

29

And was TRIED and FOUND by me:

[ ] Not Guilty [ ] Guilty as Charged [ ] Finding Sufficient - Deferred

And was FOUND by me to be:

31 [ ] driving a commercial motor vehicle [ ] carrying hazardous materials [ ] a Commercial Driver's License Holder

32 [ ] Offense: [ ] resulted in a fatality [ ] in a Highway Safety Corridor

[ ] I ORDER a nolle prosequi on prosecution's motion

[ ] I ORDER the charge dismissed [ ] with prejudice

[ ] conditioned upon payment of costs and

[ ] successful completion of [ ] traffic school or a driver improvement clinic [ ] mature driver school, § 16.1-69.48:1.

[ ] accord and satisfaction, § 19.2-151.

[ ] compliance with law, § 46.2-104 or § 46.2-1158.02.

[ ] under §§ 4.1-305, 18.2-57.3, 18.2-251 or 19.2-303.2

I impose the following Disposition:

34 [ ] FINE [ ] CIVIL PENALTY of \$ with \$ 35 suspended

36 [ ] JAIL SENTENCE of imposed, [ ] of which 37 days

mandatory minimum, with 38 suspended for a period

of 39, conditioned upon being of good behavior, keeping

the peace, obeying this order and paying fines and costs.

40 [ ] Serve jail sentence beginning [ ] on weekends only

42 [ ] Work release [ ] authorized if eligible [ ] required [ ] not authorized

43 [ ] Public work force [ ] authorized [ ] not authorized

44 [ ] On Probation for 46

45 [ ] VASAP [ ] local community-based probation agency

47 [ ] Other

Form with fields: Court Date/Time: 3, Defendant Name: (Last, First, Middle), Courtroom Number: 4, Charge: 5, Street Address: 14, Law Section: 6, Case Type: 7, City: 13, State, Zip Code, Mailing Address If Different: 15, Locality: 8, Race, Sex, 16, DOB, Amended Charge: 9, Driver's License Number/DL State: 17, Plate Number: 18, Law Section: 10, Offense Date: 11, CDL, CMV, HAZ, FAT, HSC, Agency: 20, Complainant Name/Unit Number: 21, Offense Tracking Number: 22, FOR ADMINISTRATIVE USE ONLY Virginia Crime Code: 23

48 [ ] Monitoring by GPS/other tracking device

49 [ ] Driver's License suspended for

50 [ ] Restricted Driver's License per attached order

51 [ ] Ignition Interlock for

52 [ ] Consecutive suspension under § 46.2-301

53 [ ] Restitution of \$ due by

payable to the clerk on behalf of

with interest thereon from

[ ] DATE OF LOSS OR DAMAGE [ ] TODAY'S DATE

54 [ ] as conditioned of suspended sentence [ ] to be paid first

55 [ ] COMMUNITY SERVICE hours to be completed

by 56 and supervised by 57

58 [ ] to be credited against fines and costs

59 [ ] Pay \$50 fee to the Court for Trauma Center Fund

60 [ ] Other

61 [ ] Remanded for [ ] CCRE Report [ ]

62 [ ] Bail on Appeal

DRIVER'S LICENSE/PRIVILEGE TO DRIVE IN VIRGINIA SUSPENDED

EFFECTIVE IN 30 DAYS IF FINES, COSTS, FORFEITURES, PENALTIES

OR RESTITUTION ARE NOT PAID. Va. Code § 46.2-395.

63

DATE

64

JUDGE

Table with columns: FINE, Locality, COSTS, 001 INT CRIM CHILD FEE, 113 WITNESS FEE, 114/129/237 CIVIL PENALTY, 460 FIXED TRAFFIC INFRACTION FEE, 461 FIXED MISDEMEANOR FEE, 462 FIXED DRUG MISD FEE, 120/217 CT.APPT. ATTY, 121 TRIED IN ABSENCE FEE, 137 TIME TO PAY, 192 TRAUMA CENTER FEE, 223 LIQUIDATED DAMAGES, 228 COURTHOUSE CONSTRUCTION, 234 JAIL ADMISSION FEE, 243 LOCAL TRNG ACAD FEE, 244 COURTHOUSE SECURITY FEE, OTHER (SPECIFY), TOTAL. Values include 65, 66, 67, 68, 69, 70.

71

## Data Elements

1. Summons number.
2. Case number.
3. Date and time of hearing.
4. Courtroom number where hearing to be held (if known).
5. Description of charge.
6. Code section number.
7. Case type.
8. Locality (state, county, city, town) in which offense occurred.
9. Description of amended charge.
10. Code section number of amended charge.
11. Date of offense.
12. Defendant's name.
13. Address where defendant may be found.
14. Check box to indicate if address provided in Data Element No. 13 is a change from driver's license.
15. Mailing address if different from address provided in Data Element No. 13.
16. Identification blocks for information describing defendant. See Using This Form, 4.a.
17. Driver's license number and issuing state.
18. Vehicle plate number.
19. Check box if applicable.
20. Insert name of agency and/or jurisdiction of complaining party.
21. Insert name and unit number of complainant officer.
22. Insert offense tracking number.
23. Insert Virginia Crime Code for offense charged.
24. Name of court where hearing to be held.
25. Check the appropriate box.
26. Complete the appropriate line(s) and/or check the appropriate box(es) indicating attorney status or name.
27. Check if interpreter present.
28. Check the appropriate plea and indicate that witnesses were sworn for purposes of double jeopardy.
29. Check the box if plea and recommendation.
30. Check box for court's finding.
31. Check these boxes to indicate that the defendant was driving a commercial motor vehicle, was carrying hazardous materials and/or holding a commercial driver's license, if applicable.
32. Check these boxes to indicate that the defendant committed an offense that resulted in a fatality and/or was in a Highway Safety Corridor.
33. Check appropriate box if applicable indicating what was ordered.
34. If fined or subject to civil penalty, check the appropriate box and insert total amount of fine, if any, without offset for portion of fine suspended.
35. Insert amount fine or civil penalty suspended (if any).
36. If sentenced to jail, check the box and insert period of jail sentence, if any, without offset for portion of jail sentence suspended.
37. Check box and insert the number of days that comprise a mandatory minimum sentence, if applicable.
38. Insert period of jail sentence suspended (if any).
39. Note period for which the sentence is suspended.
40. If jail term to be delayed or served on weekends, check this box and insert date and time for commencement of jail sentence.
41. Check if jail sentence being served on weekends only.
42. Check box for work release and indicate by checking box whether work release is authorized, required or not authorized.
43. Check box if the defendant is authorized or not authorized to participate in a public work force.
44. Check and show period of probation if applicable.
45. Check if referred to VASAP.
46. Check if referred to community-based probation program.
47. Check if referred to other program or agency and indicate such program or agency.
48. Check if monitoring by GPS/other tracking device is ordered.
49. Check and show period of driver's license suspension (if applicable).
50. Check if restricted driver's license issued.
51. Check if ignition interlock required and indicate period during which it is required.
52. Check if consecutive suspension under § 46.2-301.
53. Check the box and insert terms of restitution ordered by the court (if applicable). Insert date from which interest form restitution shall accrue. Check box to indicate if date is the date of loss or damage or the date of order.
54. Check if restitution is a condition of a suspended sentence and/or if restitution is to be paid first.
55. Check if community Service is ordered and indicate number of hours to be completed.
56. Insert the date for which the community service hours are to be completed by.
57. Indicate who the community service hours are to be supervised by.
58. Check if community service is to be credited against fines and costs.
59. Check if found guilty of a second or subsequent DUI within 10 years.
60. Space provided for other disposition order.
61. Check if defendant needs to be remanded to the sheriff's office for completion of a CCRE report or as otherwise noted.
62. Check box and enter amount of bail on appeal (even if security not required).
63. Date of entry of order.
64. Signature of judge.
65. Indicate Locality for fine.
66. Net fine (total fine minus portion of fine suspended).
67. Insert appropriate fixed fee.
68. Insert additional appropriate costs.
69. Other fees, costs, etc. not listed above.
70. Total fines and costs.
71. Space has been provided for insertion of continuance dates.

**Using This Form**

1. Copies
  - a. Original – to court.
  - b. First copy – to defendant.
  - c. Second copy – to party initiating action.
2. Attachments
  - a. Proof of mailing to the registered owner of a motor vehicle and, if the registered owner has identified the operator of the vehicle in an affidavit, the alleged operator of the vehicle.
3. Preparation details
  - a. Law enforcement and High Occupancy Toll Lane personnel, including the Virginia Department of Transportation or other authorized entity, may issue the summons for civil violations of HOT lane restrictions as observed by law enforcement or detected by photo-enforcement systems, respectively.
  - b. The second page of the form provides an affidavit for registered owners who wish to indicate that they were not the driver of the vehicle at the time of the violation.
  - c. The second page of the form provides prepayment instructions and options allowing the driver or registered owner to waive appearance and prepay all penalties, unpaid toll, administrative fees and court costs.
  - d. The second page of the form provides a certificate of service “box” for execution pursuant to § 19.2-76.3 following the summoned person’s failure to appear.

**SUMMONS FOR HIGH-OCCUPANCY TOLL (HOT) LANE CIVIL VIOLATION**

Commonwealth of Virginia VA. CODE §§ 33.2-500, 33.2-503

..... **1** ..... General District Court  
CITY OR COUNTY

..... **2** .....  
STREET ADDRESS OF COURT

**3** [ ] TO ANY AUTHORIZED OFFICER: Summon the Defendant as provided below:  
TO THE DEFENDANT: You are commanded to appear before this Court on

..... **4** ..... to answer this charge and claim.  
RETURN DATE AND TIME

**NOTICE OF CHARGE AND CLAIM:**

That defendant, [ ] registered owner [ ] driver, while operating a vehicle identified as follows:

..... **5** .....  
(INCLUDE LICENSE PLATE NUMBER LICENSE PLATE/TYPE STATE)

unlawfully entered a HOT lane in violation of the high-occupancy requirement and conditions for use of such HOT lanes, without payment of the required toll, or without having made arrangements with the HOT lanes operator for payment of the required toll, in violation of § 33.2-503. [ ] as observed by the law-enforcement officer issuing the summons [ ] as identified by recorded images produced by a photo-enforcement system at the location where tolls are collected for the use of such HOT lanes namely, .....

..... **6** .....  
NAME OF HOT LANE located in ..... **6** ..... on ..... **6** .....  
CITY OR COUNTY DATE AND TIME

and that the following amounts are **due and owing**:

\$ ..... **7** ..... for unpaid toll(s); \$ ..... **8** ..... administrative fee(s); \$ ..... **9** ..... costs; and \$ ..... **10** ..... civil penalty, based upon ..... **11** ..... offense(s) within ..... **12** ..... years.

..... **13** ..... **14** .....  
DATE ISSUED [ ] HOT LANES OPERATOR [ ] LAW ENFORCEMENT OFFICER [ ] CLERK [ ] MAGISTRATE  
[ ] VIRGINIA DEPARTMENT OF TRANSPORTATION

**READ NOTICE ON REVERSE**

YOU MAY AVOID COMING TO COURT ONLY IF THIS BLOCK IS CHECKED AND ALL INSTRUCTIONS FOR PREPAYMENT ON THE SECOND PAGE OF THE SUMMONS ARE FOLLOWED.

**CASE DISPOSITION**

- 16**] The defendant was this day [ ] tried in absence [ ] present.
- 17**] The defendant [ ] ..... [ ] is [ ] is not the owner of the vehicle.
- 18**] The defendant [ ] ..... [ ] is [ ] is not the driver of the vehicle.
- 19**] The vehicle described herein is the vehicle which used the HOT lanes without payment, such violation being committed by the defendant [ ] named registered owner [ ] named driver of the vehicle who has unpaid tolls and therefore, the defendant is ordered to pay the following amounts:  
\$ ..... **20** ..... unpaid toll(s); and \$ ..... **21** ..... administrative fee(s); and \$ ..... **22** ..... civil penalty, based upon ..... **23** ..... offense(s) within ..... years.
- 24**] This SUMMONS FOR HOT LANE CIVIL VIOLATION is hereby dismissed.
- 25**] The defendant did not appear and, therefore, the SUMMONS FOR HOT LANE CIVIL VIOLATION shall be executed by the sheriff.
- 26**] Other: .....

..... **27** .....  
DATE

..... **28** .....  
JUDGE

CASE NO.

**29**

[ ] Virginia Department of Transportation

[ ] **30**

NAME OF HOT LANES OPERATOR

v.

**31**

DEFENDANT NAME (LAST, FIRST, MIDDLE)

Mailing address [ ] same as above

**33**

RACE	SEX	MO.	BORN DAY	YR.	HT. FT.	IN.	WGT	EYES	HAIR
				<b>34</b>					

SSN **35**

DL# STATE

Attorney for HOT Lanes Operator

**36**

Attorney for Defendant

**37**

Offense Tracking Number:

**38**

**DISABILITY ACCOMMODATIONS** for loss of vision, hearing, mobility, etc., contact the court ahead of time.

HEARING DATE AND TIME

**39**

**COSTS**

**461** FIXED MISD FEE

**121** T.I.A. FEE

**137** TIME TO PAY

**228** COURTHOUSE CONSTRUCTION FEE

**244** COURTHOUSE SECURITY FEE

**40**

**243** LOCAL TRAINING ACADEMY FEE

**290** CIVIL PENALTY/ ADMIN COSTS/ UNPAID HOT

— CIVIL PENALTY/ ADMIN COSTS/ UNPAID HOT

**OTHER (SPECIFY)**

\$ ..... **41** .....

\$ .....

**TOTAL**

\$ ..... **42** .....

## Data Elements, page one

1. General district court name.
2. Address of court.
3. Check box if summons to be delivered in person by an authorized serving officer.
4. Hearing date and time.
5. Check appropriate box and insert vehicle identifiers in the field below.
6. Check appropriate box. In the following fields, insert name and location of the HOT lane and date and time of the defendant's unauthorized use of a HOT lane.
7. Insert actual cost of unpaid toll(s).
8. Insert total administrative fee(s) to recover expenses of collecting unpaid toll(s).
9. Insert total applicable court costs.
10. Insert civil penalty calculated based upon number of offenses within a three-year period (see § 33.2-503(3)).
11. Insert number of offenses upon which civil penalty calculated.
12. Insert number of years upon which civil penalty is calculated.
13. Date issued.
14. Signature of issuer. Check appropriate box to indicate title of issuer.
15. Check box to indicate that defendant may waive appearance and prepay all penalties, unpaid toll, administrative fees and court costs.
16. Check the applicable box to indicate whether defendant was present.
17. Check applicable box to indicate whether defendant was the owner of vehicle.
18. Check applicable box to indicate whether defendant was the operator of vehicle.
19. Check if the court finds against the defendant and check the applicable box to indicate whether the defendant is the registered owner or operator of the vehicle.
20. Insert cost of unpaid toll(s).
21. Insert total administrative fee(s) to recover expenses of collecting unpaid toll(s).
22. Insert civil penalty calculated based upon number of offenses within a three-year period (see § 33.2-503(3)).
23. Insert number of offenses and years upon which civil penalty calculated.
24. Check if the charge and claim are dismissed.
25. Check if the defendant failed to appear on the date of return set out in the mailed summons.
26. Check box and enter any other disposition.
27. Date of entry of order.
28. Signature of judge.
29. Court case number.
30. Check box and insert name and address of complaining HOT lanes operator or prosecuting agency.
31. Name and current address of defendant.
32. Check if defendant's address provided also serves as defendant's mailing address.
33. Space has been provided for defendant's mailing address if different from defendant's address.
34. Fill in physical characteristics of defendant, if known.
35. Enter defendant's social security number, driver's license number and issuing state, if known.
36. Name, address, and phone number of HOT lanes operator's attorney.
37. Name, address, and phone number of defendant's attorney.
38. Insert offense tracking number.
39. Space has been provided for insertion of continuance dates.
40. Insert the appropriate fixed penalties, fees and costs.
41. Insert other fees, costs, etc., not listed above.
42. Insert total fines, penalties, fees, and costs.

**NOTICE**

- You have the right to hire a lawyer.
- You have the right to have the clerk issue subpoenas to require witnesses to appear on your behalf in Virginia if a written request is filed in the clerk's office at least ten (10) days before trial.
- You have the right to plead guilty or *nolo contendere* to any charge placed against you.
- If convicted by the District Court, you have the right to appeal within ten (10) days after trial.
- By signing this summons, you have certified to your current mailing address. Official notices will be mailed to that address (unless you have notified the court of a change of address) and such notices are considered adequate notice even if you do not actually receive them. You must notify the court of any change of address to allow such notices to reach you. If the court has been notified of a change of address, official notices will be mailed to that new address and notices sent to such address will be considered adequate notice.
- If you fail to enter a written or court appearance, you may be tried in your absence.
- Your failure to timely pay the required penalties, fees and costs imposed upon a finding of guilt will result in the suspension of all the registration certificates and license plates issued for any motor vehicles registered solely in your name by the Virginia Department of Motor Vehicles and you will not be issued any registration certificate or license plate for any other vehicle that you seek to register solely in your name until you pay.

**WAIVER OF TRIAL  
(Plea of Guilty)**

By signing below, I certify that I have read the NOTICE and I am entering my written rather than personal appearance in the court case resulting from the HOT lane violation charged on this summons. I understand that I have a right to a trial, which I am giving up. I also understand that my plea of guilty will have the same force and effect as a finding of guilty by a judge and that a record of my guilty plea to a HOT lane violation will be sent to the Virginia Department of Motor Vehicles (or to the licensing authority which issued my license). Understanding all this, I plead guilty to the violation charged, waive my right to trial, and enclose the fine and costs prescribed.

..... **1** .....  
DATE

..... **2** .....  
SIGNATURE

**If Accused Is A Juvenile**

If the accused is under 18 years of age, the accused's parent or legal guardian must also sign, in person at the court, or if the form is mailed to the court, parent's or legal guardian's signature must be notarized.

..... **3** .....  
DATE

..... **4** .....  
SIGNATURE OF PARENT OR LEGAL GUARDIAN

Sworn and subscribed to before me this date:

..... **5** .....  
DATE

..... **6** .....  
[ ] NOTARY PUBLIC [ ] CLERK [ ] MAGISTRATE

..... **7** .....  
CITY OR COUNTY STATE

My commission expires: ..... **7** .....

**PREPAYMENT INSTRUCTIONS**

- Calculate the amount you owe from the penalties, unpaid toll, administrative fees, and costs provided on the first page of the SUMMONS.
- Read the NOTICE below and sign and date the waiver of trial on this SUMMONS. Also, complete the procedure "If Accused Is A Juvenile" if you are charged with a HOT lane violation and are under age 18.
- Promptly mail or deliver to the court this SUMMONS with payment attached. Payment must be received by the court before the court date. To provide for timely delivery by mail, payment should be mailed at least 7 days before the court date.
- District courts accept personal checks and credit or debit cards, but if you wish to pay by credit or debit card, you should ask the court which type of credit or debit cards it accepts. Make checks payable to the District Court.  
**If you pay by credit or debit card, you will be charged a 4% convenience fee.**

NAME OF CARDHOLDER: <b>8</b>	CREDIT CARD TYPE: <b>9</b>
TOTAL AMOUNT OF PAYMENT \$ <b>10</b>	CREDIT OR DEBIT CARD NUMBER: <b>11</b>
EXPIRATION DATE (mm/yy) <b>12</b>	DAYTIME TELEPHONE NUMBER <b>13</b>
SIGNATURE: ..... <b>14</b> .....	

**To the Registered Owner, Lessee, or Renter of the Vehicle Described in the  
SUMMONS FOR HOT LANE CIVIL VIOLATION**

If you are the registered owner of the vehicle described on the front side of this SUMMONS, but you were not the driver of the vehicle on the date the vehicle is alleged to have violated the HOT lane without payment pursuant to Va. Code § 33.2-503, then you may complete the Affidavit below and a SUMMONS FOR HOT LANE CIVIL VIOLATION will be issued for the alleged driver of the vehicle, if you provide the legal name and street address of that driver of the vehicle and file the Affidavit with the court at least 14 days prior to the hearing date.

**NOTE:**

- You may file the affidavit by regular mail to the Clerk of this court.
- Even if you file the Affidavit with the court to have a SUMMONS FOR HOT LANE CIVIL VIOLATION issued for the alleged driver of the vehicle, you are still required to appear in court in response to this SUMMONS. Failure to appear could result in action against you.
- The Affidavit must be filed with the court at least 14 days prior to the hearing date, or a SUMMONS FOR HOT LANE VIOLATION cannot be issued to the alleged driver of the vehicle in time for the hearing.
- If you were not driving the vehicle on the date of the alleged violation and the car was stolen at the time, you must bring a certified copy of the police report stating that the vehicle was stolen when the alleged violation occurred.

**AFFIDAVIT OF REGISTERED OWNER:**

I am the registered owner of the vehicle described on the front side of this SUMMONS FOR HOT LANE CIVIL VIOLATION. I hereby affirm that I was not the driver of the vehicle on the date of the alleged violation and that the vehicle was driven on that date by

..... **15** .....  
LEGAL NAME OF OPERATOR [ ] Operator of vehicle is under 18 years of age

..... **16** .....  
ADDRESS OF OPERATOR

..... **17** .....  
DATE

..... **18** .....  
SIGNATURE OF REGISTERED OWNER OF VEHICLE

..... **19** .....  
TELEPHONE NUMBER

..... **20** .....  
PRINTED NAME OF REGISTERED OWNER OF VEHICLE

The above-named affiant personally appeared this day before the undersigned, and upon duly being sworn, made oath that the facts stated in this affidavit are true to the best of his or her knowledge, information and belief.

..... **21** .....  
DATE

..... **22** .....  
[ ] CLERK [ ] DEPUTY CLERK  
[ ] NOTARY PUBLIC My Commission expires: ..... **23** .....

CLERK'S OFFICE USE ONLY:  
Affidavit received on ..... **24** .....  
..... **25** .....  
CLERK INITIALS

RETURN: The defendant was served according to law, as indicated below, unless not found.

NAME: ..... **26** .....

ADDRESS: ..... **27** .....

**28** [ ] PERSONAL SERVICE Tel. No. ....

**29** [ ] Being unable to make personal service, a copy was delivered in the following manner:  
[ ] Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.  
.....  
[ ] Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)  
[ ] Served on Secretary of the Commonwealth.  
[ ] Served on Clerk of the State Corporation Commission.

**30** [ ] Not found

..... **31** .....  
SERVING OFFICER

..... **32** .....  
DATE for ..... **33** .....

## Data Elements, page two

- |   |  |
|---|--|
| <ol style="list-style-type: none"> <li>1. Date of signing by person waiving appearance.</li> <li>2. Signature of person waiving appearance.</li> <li>3. Date of signing by parent or legal guardian of person waiving appearance if person is less than eighteen years of age.</li> <li>4. Signature of parent or legal guardian of person waiving appearance.</li> <li>5. Date of acknowledgement.</li> <li>6. Signature of person taking acknowledgment. Check the applicable title box.</li> <li>7. Location in which acknowledgment taken. If acknowledgment taken by notary public, insert date of expiration of commission and notary's registration number.</li> </ol> | <ol style="list-style-type: none"> <li>22. Signature of person taking the acknowledgment. Check applicable title box.</li> <li>23. If acknowledgment taken by notary public, insert date of expiration of commission, notary's registration number, and location of notarization.</li> <li>24. Date of receipt of registered owner's affidavit.</li> <li>25. Clerk's initials.</li> <li>26. Name of person to be summoned. If person is a corporation's or other legal entity's officer, designated agent, managing employee or registered agent, show name of corporation on second line.</li> <li>27. Address and telephone number of person to be summoned.</li> <li>28. Check this box if personal service obtained.</li> <li>29. Serving officer to check the appropriate box to designate type of substituted service. If served by leaving the summons with a family member age 16 or older, insert required information.</li> <li>30. Check this box if unable to serve process.</li> <li>31. Signature of serving officer.</li> <li>32. Date of signature.</li> <li>33. Name of sheriff if served by deputy sheriff.</li> </ol> |
|---|--|
- For use only when the defendant chooses to prepay his or her unpaid toll, fines, penalties and costs using a credit card:

  8. Enter name of credit or debit card holder.
  9. Indicate the type of card used for the transaction (*i.e.*, American Express, Discover, MasterCard, Visa).
  10. Insert total amount due (see page one).
  11. Insert credit or debit card account number located on front of card.
  12. Insert the credit or debit card expiration date (month and year).
  13. Insert credit or debit card holder's daytime telephone number.
  14. Signature of credit or debit card holder.
15. Insert legal name of operator of motor vehicle and check box if operator is less than 18 years of age.
  16. Insert address of operator of motor vehicle.
  17. Date of signing of affidavit.
  18. Signature of affiant-registered owner.
  19. Telephone number of affiant-registered owner.
  20. Printed name of affiant-registered owner.
  21. Date of acknowledgment.