

IN THE DELAWARE MUNICIPAL COURT, DELAWARE COUNTY, OHIO

70 North Union Street, Delaware, Ohio 43015 • Voice: 740.203.1560 • Facsimile: 740.203.1599 • e-filing@municipalcourt.org

State of Ohio

Registrar, OBMV

Respondent

CASE NO: \_\_\_\_\_

vs.

adv.

↗court case number only

Petition Regarding Driving Privilege

Suspension imposed by OBMV

\_\_\_\_\_ full name, please print

√ one> this case is [ ] new civil [ ] existing Crim-Traf (4510.73)

\_\_\_\_\_ address

CV • 12pt. Suspension - Appeal and/or Driving Privileges

\_\_\_\_\_ city, state zip

CV • Noncompliance Suspension - Driving Privileges (2+ w/in 5yrs)

CV • Reinstatement Fee - Pay Plan and/or Driving Privileges

\_\_\_\_\_ email

CV • Foreign Jurisdiction OVI-Drug Offense Susp. - Driving Privileges

CV • Other Appeals/Petitions

\_\_\_\_\_ Petitioner - Appellant - Defendant

TRCR • Other Appeal/Petition re OBMV Suspension

TRCR • Suspension by this Court Concurrent with OBMV Suspension

1. A. Petitioner received driving privilege suspension notice from the Ohio Bureau of the Motor Vehicles (OBMV) due to [check applicable field(s)] [ ] accumulation of points [ ] failure to show proof of financial responsibility [ ] suspension of privileges by foreign jurisdiction for drug or OVI offense [ ] pending payment of reinstatement fees required under R.C. §§ 4507.1612, 4507.45, 4509.101, 4509.81, 4511.191, or 4511.951 [ ] other \_\_\_\_\_

B. A copy of Petitioner’s OBMV driving record is attached [failure to attach may delay processing this petition].

C. The beginning date(s) of the suspension(s) is / are / was: \_\_\_\_\_.

D. Petitioner presently maintains proof of financial responsibility, a copy of which is attached [except, in 12 point suspension and reinstatement fee deferral/payment plan petitions that do not seek driving privileges, and Administrative Appeals].

E. Petitioner certifies that all information provided on this petition and any attachment is true and accurate.

F. Unpaid reinstatement fees currently due to OBMV total \$ \_\_\_\_\_ [if requesting payment plan or delay].

[Check one or more of the following sections that apply. Checking inapplicable sections will delay processing of the petition.]

2. 12 Point Suspension Appeal. Petitioner appeals imposition of the suspension and requests

[ ] A. driving privileges as set forth on the attached Driving Privileges Request Supplement. [Privileges can be granted without oral hearing. Suspension is stayed only if appeal filed before suspension begins.] R.C. § 4510.037(G).

[ ] B. reversal of OBMV suspension due to excess points. [Oral hearing required.] This petition is filed BEFORE the effective date of suspension. Petitioner can show cause why the suspension should be set aside. R.C. § 4510.037(B).

[ ] 3. Noncompliance Suspension R.C. § 4509.101. A. Petitioner has complied with R.C. § 4509.101(A)(5) by submitting to the Ohio Bureau of the Motor Vehicles all of the following, where applicable:

i. Financial responsibility reinstatement fee unless pay plan or delay requested herein (copy of OBMV receipt attached).

ii. Financial responsibility nonvoluntary compliance fee, if applicable (copy of OBMV receipt attached).

iii. Proof of financial responsibility - SR22 (copy attached).

B. Petitioner requests limited driving privileges as detailed on the attached Driving Privileges Request Supplement and as allowed by law. (On 1st suspension in 5 yrs, OBMV will restore privileges on payment of reinstatement fee and proof of insurance. Court privileges are prohibited during the first 15 days of 2nd noncompliance suspension w/in 5yrs of violation, and 1st 30 days if there are two or more prior noncompliance suspensions within 5yrs of violation).

4. Foreign Jurisdiction Suspension. R.C. § 4510.17(E). Due to suspension by a foreign jurisdiction, the OBMV imposed a suspension which seriously affects Petitioner’s ability to continue employment. (check one)

A. [ ] Petitioner requests limited work-related driving privileges during the suspension of Ohio driving privileges.

B. [ ] Petitioner is a first-time OVI offender and seeks unlimited driving privileges with a certified ignition interlock device (CIID) during a suspension imposed due to a foreign-jurisdiction OVI suspension. Petitioner acknowledges that upon notice that the CIID prevented vehicle start by petitioner or is circumvented/tampered with, or that Petitioner operated vehicle w/o CIID, the court may require remote-function continuous alcohol monitor be worn for 0 - 60+ days and either double the period that OL is suspended and/or that CIID is required, or extend CIID requirement by 60+ days. R.C. § 4510.022(C)(2),(E).

[ ] 5. Other Appeal or Petition. R.C. § 4510.73 (fully explain, use additional sheets if necessary). \_\_\_\_\_

**[ 16. Plan or Delay to Pay Reinstatement Fees. R.C. § 4510.10.** Petitioner cannot reasonably pay reinstatement fees as shown at ¶1(F) now due on the suspension(s) now in effect or about to begin; but for said fee(s) and any other suspension above mentioned, Petitioner would be eligible to operate a vehicle or obtain reinstatement of operating privileges in Ohio. Proof of financial responsibility and a copy of Petitioner’s OBMV driving record are attached. Petitioner requests limited driving privileges shown on the attached Driving Privileges Request Supplement and as otherwise allowed by law. (Before filing this application, Petitioner should investigate eligibility for OBMV Fee Installment Plan (BMV Form 1152) which requires no filing fee and restores unlimited driving privileges.) Pending full payment of all reinstatement fees due, Petitioner requests [*CHECK ONLY ONE*]:

A.  A reasonable payment plan not less than \$50 per month payable to the OBMV until all reinstatement fees are paid in full. R.C. § 4510.10(D)(1). (Monthly payments required to maintain limited driving privileges.)

B.  A payment delay not longer than 180 days at the end of which full payment of all reinstatement fees must be made to the OBMV in order to maintain or recover driving privileges (no payments required during delay period). (NO FURTHER DELAY IS PERMITTED. LIMITED PRIVILEGES EXPIRE AT END OF THE DELAY PERIOD PENDING PAYMENT OF ALL FEES DUE.) R.C. § 4510.10(D)(2).

7. Wherefore, Petitioner requests that the court grant the relief above requested. If this is a traffic or criminal case and the court imposed a license suspension, Petitioner seeks driving privileges during the court suspension. Petitioner acknowledges that the clerk and court personnel cannot give legal advice and no information provided has been taken as such. Petitioner acknowledges that this form is provided as a convenience; nothing in the form constitutes legal advice. [Court cost deposits, where required, are not refundable if the court denies relief requested. For legal advice Petitioner must contact an attorney.]

8. **Precipe for Service [in new civil case only].** Petitioner requests that the clerk serve a copy hereof on Respondent by regular mail and on the Delaware City Prosecutor by leaving a copy hereof in the Prosecutor’s box at the court.

signature of <input type="checkbox"/> petitioner <input type="checkbox"/> attorney for petitioner	print name of attorney for petitioner (if filed by atty.)	SCR#
petitioner phone number	address (of atty, if filed by atty.)	
XXX-XX-		
petitioner OL#                      SSN                      DOB	City, State   Zip	p hone
[petition may be delayed/denied if identifying data is incomplete.]		

[Proper service must be shown. Only one signature required.]

10. I served a copy hereof by  placing copy in the City Prosecutor’s court mail box.  regular U.S. mail.

A. Return of Service - [use in new civil case]

*Cindy Dinovo*, Clerk of Court

by: \_\_\_\_\_  
Deputy Clerk

B. Certificate of Service [use in existing Traffic/Criminal Case]

\_\_\_\_\_  
 Petitioner  Attorney for Petitioner

CvW Driv Priv Omnibus Pet FITB HB388 2017.pet.wpd0716211134 ©2017 K. Pelanda Ver 16Jul21

**11. The following documentation must be submitted in order to avoid processing delays and/or dismissal of the petition.**

**A. All petitions require the following:**

- i.  OBMV Driving Record (DR), either of the following (must show applicable active and future suspensions, if any):
  - a. official abstract from OBMV.
  - b. Unofficial driving record (DR) from www.bmv.ohio.gov (click ‘online services’ then ‘view BMV driving record.’)
- ii.  Notice of Suspension (if details are not shown in DR)
- iii.  Proof of financial responsibility currently in force if driving privileges requested, unless DR shows SR22 filed.
- iv.  Driving Privileges Request Supplement (if driving privileges requested).

**B. With the following, the petition must also include:**

- i. Noncompliance suspension petitions:**
  - a.  OBMV nonvoluntary compliance fee receipt, if applicable, unless DR shows paid.
  - b.  OBMV reinstatement fee receipt, unless DR shows paid.
- ii. Reinstatement fee deferral / pay plan petitions:**
  - OBMV nonvoluntary compliance fee receipt, if applicable, unless DR shows paid.

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**Driving Privileges Request Supplement For Use with Separate Petition/Appeal Regarding Driving Privileges**

1. Petitioner name: \_\_\_\_\_ DOB \_\_\_\_\_ Case No. \_\_\_\_\_

2. Petitioner Address: \_\_\_\_\_

3. OL# \_\_\_\_\_ Issuing state \_\_\_\_\_ Expiration date \_\_\_\_\_ SS# XXX - XX - \_\_\_\_\_

4. Begin & end date(s) of suspension(s) per OBMV notice(s): Begin \_\_\_\_\_, End \_\_\_\_\_

4. Are you aware of any other suspension of your driving privileges (if yes, describe in ¶6)? [circle one]. Yes No

5. Employer / School information: 1<sup>st</sup> Employer / school 2d Employer / school

A. Name . . . . . \_\_\_\_\_

B. Street Address . . . . . \_\_\_\_\_

C. City, State Zip . . . . . \_\_\_\_\_

D. Employer/ School Telephone . . . . . ( ) \_\_\_\_\_ ( ) \_\_\_\_\_

E. Work address if different from above (for multiple work sites use ¶6) . . . . . \_\_\_\_\_

F. Work days & hours EXCLUDING COMMUTE TIME. Excessive hours or failure to provide hours will lead to delay or denial of application. Explain at ¶6 if hours are more than 10hrs/day or 50 hrs/week.  [ ] Check if on-call during other hours. Explain below at ¶6.		From		To		From		To
	Mon	_____M		_____M	Mon	_____M		_____M
	Tues	_____M		_____M	Tues	_____M		_____M
	Wed	_____M		_____M	Wed	_____M		_____M
	Thur	_____M		_____M	Thur	_____M		_____M
	Fri	_____M		_____M	Fri	_____M		_____M
	Sat	_____M		_____M	Sat	_____M		_____M
Sun	_____M		_____M	Sun	_____M		_____M	

G. Commuting distance and time . . . . . Dist. \_\_\_\_\_ Miles \_\_\_\_\_ Min's. Dist. \_\_\_\_\_ Miles \_\_\_\_\_ Min's.

6. Other \_\_\_\_\_

7. [ ] Petitioner /Atty. will pick up entry. *Entry will be sent by email/mail unless this box is checked.*

The undersigned confirms that the above information is true and complete.

X \_\_\_\_\_  
Signature of Petitioner *Not required if filed by Atty.*

X \_\_\_\_\_  
Attorney for Petitioner *if filed by attorney)*