REQUIREMENTS FOR ISSUANCE OF TEXAS OCCUPATIONAL DRIVER'S LICENSE

A TEXAS OCCUPATIONAL DRIVER'S LICENSE AUTHORIZED BY A COUNTY COURT AT LAW ORDER CANNOT BE ISSUED UNTIL THE FOLLOWING DOCUMENTS AND MATERIALS HAVE BEEN SUBMITTED TO THE DEPARTMENT OF PUBLIC SAFETY.

- 1. A filing fee of \$247.00 check, cash or money order (non refundable). (Location: Civil Central Filing B.04 of the Old Courthouse, 100 Dolorosa, San Antonio, Texas.)
- 2. Forms: Application for Occupational License, Order Granting Occupational License and DIC-37 Data for Texas info of applicant. (Location: Law Library- 5th floor of the Old Courthouse)
 - → Get application notarized (Location: Paul Elizondo Tower-1st floor or any other notary public.)
- 4. SR-22- (Proof of financial responsibility. Issued by an insurance company authorized to write 3. Proof of Insurance. liability insurance in Texas. Some insurance companies may charge for SR-22 form.
- 5. Certified copy of Driving Record (Can be purchased and downloaded from DMV website)
- 7. Certified copy of the Court Order setting out the Judge's finding and restrictions imposed. (Location: Civil Central Filing B104 of the Old Courthouse)
- 8. A reinstatement fee mailed to the Texas Department of Public Safety along with a completed
- 9. A fee for issuance of the occupational license through the Texas Department of Public Safety.
- 10. Mail the above to: Drivers Improvement and Control

Texas Department of Public Safety

P.O Box 4087

Austin, Texas 78773

CAVEAT: A certified copy of the Court Order must be carried by the applicant at all times while operating a motor vehicle. The Texas Department of Public Safety has a separate process and has a separate reinstatement fee.

INSTRUCTIONS FOR PRO SE APPLICANTS FOR OCCUPATIONAL DRIVERS LICENSE:

- 1. Fill out ALL information on the Petition for Occupational Driver's License.
- 2. You may obtain the necessary information on your case number and Convicting or pending Court in <u>Criminal Central Filing</u> in the basement of the Bexar County Courthouse.
- 3. Fill out the heading AND items 1 through 6 on the Order on Occupational Driver's license.
- 4. Attach a copy of SR 22 (Proof of Financial Responsibility form) and a CERTIFIED copy of your driver's license record to the petition. The Petition MUST be notarized.
- 5. Petitioners are encouraged to verify eligibility before filing of their petition as the filing fees are non-refundable. The filing fee is \$247.00 and must be paid in Civil Central Filing, B.04 of the Bexar County Courthouse, 100 Dolorosa, San Antonio, Texas. Some petitions will be required to be set for hearing.
- 6. Once the Order has been signed, a certified copy of the petition and a certified copy of the Court order, along with a completed DIC-37 form (IN THIS PACKET) and payment of the occupational license fee and any reinstatement fees must be sent to the Texas Department of Public Safety. These fees are separate from the Bexar County Filing fee.

The mailing address is:

Texas Department of Public Safety Enforcement and Compliance Service P.O. Box 4087 Austin, TX 78773-0320 Fax: (512) 424-2848

Email: driver.improvement@dps.texas.gov

- 7. Information on DPS' fees can be found at: http://www.txdps.state.tx.us/DriverLicense/OccupationalLicense.htm
- 8. To get a **CERTIFIED** copy (**ONLINE ONLY**) of your driver's record please go to www.texasdps.state.tx.us

NOTE: AS STATED IN THE ORDER, A certified copy of the Court Order must be carried by the applicant at all times while operating a motor vehicle. You must follow all terms set by the court and may not drive outside the terms of the order.

IMPORTANT: PLEASE CHECK #6 ON THE PETITION TO MAKE SURE YOU CAN USE THESE FORMS!!!!!!

WHEN YOU REPRESENT YOURSELF IT IS YOUR RESPONSIBILITY TO CHECK BEFORE FILING

Updated: 12/06/2017

DATA FOR TEXAS OCCUPATIONAL DRIVER'S LICENSE

PRINT OR TYPE:						
Full Name:					· ·	
First			Mi	ddle		Last
Address:						
			Street A	ddress		
City			St	ate	Zip	Code
Date of Birth Month Day Year	Sex	Color Eyes	Color Hair	Weight Pounds	Height Ft. Inch	Driver's License No.
Mail to: Driver Imp Occupation Texas Dep	nal Lic	ense Se	d Contro		ture of Ap	
P.O. Box 1 Austin, TX	5999			-c ,		
INFORMATION BE	LOW	THIS L	INE IS	FOR DEP	ARTMEN	T USE ONLY
DATE OF ISSUE:	·		N .	EXPIR	RE:	
(DIC-37)						

INSTRUCCIONES PARA SOLICITANTES DE PRO SE PARA LA LICENCIA DE CONDUCTORES OCUPACIONALES:

- 1. Complete TODA la información en la Petición de Licencia de Conducir Ocupacional.
- 2. Puede obtener la información necesaria sobre su número de caso y Convicto o pendiente de la Corte en <u>presentación central criminal</u> en el sótano del Juzgado del Condado de Bexar.
- 3. Complete el encabezado Y los artículos 1 a 6 en la Orden de licencia de conductor ocupacional.
- 4. Adjunte a la petición una copia de la SR 22 (formulario de Prueba de responsabilidad financiera) y una copia CERTIFICADA del registro de su licencia de conducir. La petición DEBE ser notariada.
- 5. Se alienta a los peticionarios a verificar su elegibilidad antes de presentar su petición ya que las tarifas de presentación no son reembolsables. La tarifa de presentación es de \$247.00 y debe pagarse en la Central de Registro Civil, B.04 del Juzgado del Condado de Bexar, 100 Dolorosa, San Antonio, Texas. Algunas peticiones se establecerán para la audiencia.
- 6. Una vez que la orden ha sido firmada, una copia certificada de la petición y una copia certificada de la orden judicial, junto con un formulario DIC-37 completado (EN ESTE PAQUETE) y el pago de la tarifa de licencia ocupacional y las tarifas de restitución deben ser enviado al Departamento de Seguridad Pública de Texas. Estas tarifas son independientes de la tarifa de presentación del condado de Bexar.

 La dirección postal es:

Texas Department of Public Safety Enforcement and Compliance Service P.O. Box 4087 Austin, TX 78773-0320 Fax: (512) 424-2848

Email: driver.improvement@dps.texas.gov

- 7. La información sobre las tarifas de DPS se puede encontrar en: http://www.txdps.state.tx.us/DriverLicense/OccupationalLicense.htm
- 8. Para obtener una copia CERTIFICADA (SOLO EN LÍNEA) de su registro de conductor, vaya a:

www.texasdps.state.tx.us

NOTA: SEGÚN LO ESTABLECIDO EN LA ORDEN, el solicitante debe llevar consigo una copia certificada de la orden judicial en todo momento mientras conduce un vehículo de motor. Debe seguir todos los términos establecidos por la corte y no puede conducir fuera de los términos de la orden.

IMPORTANTE: POR FAVOR, MARQUE # 6 EN LA PETICIÓN PARA ASEGURARSE DE QUE USTED PUEDA USAR ESTOS FORMULARIOS !!!!!!! CUANDO USTED REPRESENTA USTED MISMO ES SU RESPONSABILIDAD DE VERIFICAR ANTES DE PRESENTAR UNA SOLICITUD

Updated: 12/06/2017

TO BE FILLED BY COUNTY CLERK IN THE COUNTY COURT * BY AT LAW NUMBER * DRIVER'S LICENSE NUMBER * BEXAR COUNTY, TEXAS PETITION FOR OCCUPATIONAL DRIVER'S LICENSE COMES NOW		Case No:	TD DV C	OUNTY OF EDV
First Middle Last	Ex Pari			
PETITION FOR OCCUPATIONAL DRIVER'S LICENSE COMES NOW			*	
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PETITION FOR OCCUPATIONAL DRIVER'S LICENSE COMES NOW				
Tirst Middle Last	DRIVE	ER'S LICENSE NUMBER	*	BEXAR COUNTY, TEXAS
Tirst Middle Last				
Tirst Middle Last		PETITION FOR OCCUI	PATIO	NAL DRIVER'S LICENSE
I. I am the petitioner, and am asking the court for an Occupational Driver's License. Below is the necessary information for the Court to reach its decision. 1. Home address: 2. Mailing address, if different from number (1) above: 3. Phone number: (
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2. Mailing address, if different from number (1) above: 3. Phone number: (inform	ation for the Court to reach its decision.		
2. Mailing address, if different from number (1) above: 3. Phone number: (1.	Home address:		
3. Phone number: (2			
 Phone number: (2.		` ,	
 4. Date of Birth:	3			
 5. Driver's License Number and Issuing State:				
6. My license was suspended on for [circle the item(s) that apply] Breath test refusal for arrest for DWI 1 st Breath test refusal for DWI 2 nd Providing a breath or blood sample above the legal limit Conviction for DWI 1 st Conviction for DWI 2 nd Outstanding ticket(s) Judgment for unpaid Child Support arrears Other: (Please state reason below) 7. My case is currently pending in County Court at Law number Under Cause number; or I am on probation for out of County Court at Law number under				
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Outstanding ticket(s) Other: (Please state reason below) 7. My case is currently pending in County Court at Law number Under Cause number; or I am on probation for out of County Court at Law number under			ove the le	
Other: (Please state reason below) 7. My case is currently pending in County Court at Law number Under Cause number; or I am on probation for out of County Court at Law number under		Conviction for DWI 1 st		Conviction for DWI 2 nd
7. My case is currently pending in County Court at Law number Under Cause number; or I am on probation for out of County Court at Law number under		Outstanding ticket(s)		Judgment for unpaid Child Support arrears
Under Cause number; or I am on probation for out of County Court at Law number under		Other: (Please state reason below)		
Under Cause number; or I am on probation for out of County Court at Law number under				
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Under Cause number; or I am on probation for out of County Court at Law number under				
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		1 1/		
		cause number	_ out of (under

•			nst you for pa ently have an				n all of the
vehicles I	own or driv	⁄е.					
ONLY IF	interlock is	installed: I	therefore req	uest that the t	ime restric	tions and "es	ssential need
requireme	nt be waive	d.					
				II.	•		
IF you DO) have an ig	nition interle	ck device ins	talled on all o	of the vehic	les you own	, you may
skip this s	ection:						
I need an	occupationa	l license for	(circle those t	hat annly) ·			
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Work	School	ol E	ssential Hous	ehold duties	Other	(specify belo)W)
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					Other	(ѕреспу век)W)
Name and	location of		d/ or School:		Other	(ѕреспу век)W)
Name and	location of	employer an	d/ or School:		FRI	SAT	SUN
Name and Driving so	location of	employer an	nd/ or School:				
Name and	location of	employer an	nd/ or School:				
Name and Driving so From (time)	location of	employer an	nd/ or School:				
Driving so From (time) To (time)	chedule you MON	are requesting TUES	ng: WEDS	THURS	FRI		
Driving so From (time) To (time)	chedule you MON	are requesting TUES	ng: WEDS	THURS	FRI		
Driving so From (time) To (time)	chedule you MON	are requesting TUES	ng: WEDS	THURS	FRI		
Driving so From (time) To (time)	chedule you MON	are requesting TUES	ng: WEDS	THURS	FRI		

THE FOLLOWING DOCUMENTS ARE ATTACHED TO MY PETITION:

- 1. A CERTIFIED COPY OF MY DRIVER'S LICENSE RECORD
- 2. COPY OF SR22 PROOF OF FINANCIAL RESPONSIBILITY

IX	I.
WHEREFORE, PREMISES CONSIDERED, Ap	oplicant prays for relief in accordance with this
petition.	
	Respectfully submitted,
APPLICANT'S NAME (print)	APPLICANT'S SIGNATURE.
STATE OF TEXAS COUNTY OF BEXAR I am the Applicant in the above styled and number for Occupational License and swear that all of the	
true and correct.	
	APPLICANT'S SIGNATURE
Subscribed and sworn before me, to certify which	

NOTARY PUBLIC

		Case No:		· .	
. •		TO BE F	ILLED BY C	OUNTY CLEF	
Ex Parte			*	IN TI	HE COUNTY COURT
			*		
First	Middle	Last	- *	AT L	AW NUMBER
			*		
DDIVEDIC	LICENICE	MIMPER	* - *	DEM	AR COUNTY TEVAS
DRIVER'S	LICENSE	NUMBER	~	BEX	AR COUNTY, TEXAS
	ORD	ER ON OCCI	IPATION	AL DRIVE	R'S LICENSE
	OILD	ZI ON OCCU	7171110117	IL DITTE	K 5 EICENSE
On this day,	came to be	e heard an Applicat	ion for Occup	ational License	as filed in the above styled and
numbered c	ause. The	Application for Occ	cupational Dri	ver's License is	s hereby GRANTED/ DENIED,
and the cour	rt makes the	e following addition	nal findings:		
			I.		
DETITION II	TRIC PERC	IONAL DIFORMA	Tro.		
PETHIONI	ER'S PERS	SONAL INFORMA	TION:		
1. Nar	ne:				
		First	Middle		Last
2. Ho	me address	: <u></u>			•
3. Ma	ling addres	ss, if different from	number (1) at	ove:	
· · · · · ·	i.				***************************************
4. Pho	ne number	:()			
5. Dat	e of Birth:	/	/		
		se Number and Issu			
		iver's License was			for [circle the item(s) that apply
		usal for arrest for D	•		ioi [energe the item(s) that appry]
					usai for DW1 2
		eath or blood sampl	e above the le		
	viction for			Conviction fo	r DWI 2 nd
Out	standing tio	cket(s)		Judgment for	unpaid Child Support arrears
Oth	er: (Please	state reason below)		
8. Peti	tioner's lie	cense WAS/WAS N	OT suspende	hecause of a	ohysical or mental disability
J. 1 Oti	organion is the	S/HAS NOT had 2 of	or suspende	i occause of a	onysical of incinal disability

	DOES / DO) NOT curren	ntly have an i	gnition interle	ock device	installed on	all of the	
vehicles Petitioner owns or drives.								
2. Petitioner has had the following previous license suspensions:								
				•				
-								
Petitione	has had the	following pr	revious Occup	pational Drive	er's Licens	es:		
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				II.				
		DES NOT nee		trate an essen	tial need to	the court. I	f an essei	
Petitione Work	r has demons Schoo		d for an occup	national licens		le those that a		
	School					(apromy con-		
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Name and								
Name and								
Name and								
Name and								
	d location of	employer an	nd/ or School:					
The cour	d location of	employer an	nd/ or School:		nd restricts	s Petitioner's		
The cour	d location of	employer an	ive the 4-hour	r restriction, a	nd restricts	s Petitioner's	driving t	
The cour more than From	d location of	employer an ES NOT wai	nd/ or School:	r restriction, a	nd restricts time fram	s Petitioner's es below:		
The cour more than From (time)	d location of	employer an ES NOT wai	ive the 4-hour	r restriction, a	nd restricts time fram	s Petitioner's es below:	driving t	
The cour more than From	d location of	employer an ES NOT wai	ive the 4-hour	r restriction, a	nd restricts time fram	s Petitioner's es below:	driving t	
The courmore than From (time) To (time)	t DOES/DOI	employer an ES NOT wai	ive the 4-hourours per day, WEDS	r restriction, a	nd restricts time fram	s Petitioner's es below:	driving t	
The courmore than From (time) To (time)	t DOES/DOI	ES NOT wai ho	ive the 4-hourours per day, WEDS	r restriction, a	nd restricts time fram	s Petitioner's es below:	driving t	
The courmore than From (time) To (time) Reason for	d location of t DOES/DOI MON Or waiving 4	ES NOT wai ho	ive the 4-hour ours per day, WEDS	r restriction, a	nd restricts time fram	s Petitioner's es below:	driving t	

The petitioner M	TAM
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THE DEHIDHER IVE	\mathbf{v}

- 1. Maintain valid auto liability insurance for the entire period the Occupational Driver's License is in effect.
- 2. Carry a certified copy of this Order and an Occupational Driver's License (once received) while driving.
- 3. Allow a peace officer to examine the Order when requested.

The petitioner MUST ALSO: (Circle as applicable)

- 4. Restrict driving as stated above in section II.
- 5. Record dates, times, mileage, destinations, and reasons for travel in travel log.
- 6. Carry and update the travel log as petitioner drives.
- 7. Upon request, provide the travel log to any peace officer.
- 8. Attend an approved alcohol/drug counseling program.

9.	Comply wi	th all terms of	of probation in ca	use number	·	
10.	Other:					
				· .		

IV.

The Petitioner MUST NOT: (Strike through if inapplicable)

- 1. Drive a commercial vehicle.
- 2. Drive any vehicle unless it has an ignition interlock device, as required by law.
- 3. Violate any laws of the State of Texas.
- 4. Drive outside of the allowed parameters of this order.

V.

This order is to remain in effect for the duration of the license suspension, or for a maximum period of one year, whichever is less.

SIGNED	this	day of	20	
		 •		

JUDGE PRESIDING

REQUIREMENTS FOR ISSUANCE OF TEXAS OCCUPATIONAL DRIVER'S LICENSE

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Texas Department of Public Safety P.O Box 4087 Austin, Texas 78773

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