

STATE OF WISCONSIN	CIRCUIT COURT	MANITOWOC COUNTY																									
STATE OF WISCONSIN, Plaintiff vs. _____, Defendant.	PETITION FOR IGNITION INTERLOCK DEVICE COST REDUCTION OR VEHICLE EXEMPTION OR BOTH, FINDINGS, AND ORDER Case No. _____																										
<p>I am the defendant and following is a complete list of the vehicle(s) that I own or that is/are registered in my name:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">NO.</th> <th style="width: 15%;">YEAR</th> <th style="width: 20%;">MAKE</th> <th style="width: 30%;">VEHICLE ID NUMBER</th> <th style="width: 30%;">LICENSE PLATE NO.</th> </tr> </thead> <tbody> <tr><td>1</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>2</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>3</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>4</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>			NO.	YEAR	MAKE	VEHICLE ID NUMBER	LICENSE PLATE NO.	1	_____	_____	_____	_____	2	_____	_____	_____	_____	3	_____	_____	_____	_____	4	_____	_____	_____	_____
NO.	YEAR	MAKE	VEHICLE ID NUMBER	LICENSE PLATE NO.																							
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2	_____	_____	_____	_____																							
3	_____	_____	_____	_____																							
4	_____	_____	_____	_____																							
<p>I own more than 4 vehicles and I have attached a list of all of the other vehicles that I own, along with the year, make, vehicle identification number, and license plate number of each vehicle.</p>																											
<p>I am the defendant and following is a complete list of the vehicle(s) that I intend to operate, that are not registered in my name, and that must be equipped with an ignition interlock device for me to legally operate:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">NO.</th> <th style="width: 15%;">YEAR</th> <th style="width: 20%;">MAKE</th> <th style="width: 30%;">VEHICLE ID NUMBER</th> <th style="width: 30%;">LICENSE PLATE NO.</th> </tr> </thead> <tbody> <tr><td>1</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>2</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>			NO.	YEAR	MAKE	VEHICLE ID NUMBER	LICENSE PLATE NO.	1	_____	_____	_____	_____	2	_____	_____	_____	_____										
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1	_____	_____	_____	_____																							
2	_____	_____	_____	_____																							
<p>I intend to operate more than 2 vehicles that are not registered in my name and I have attached a list of all of the other vehicles that are not registered in my name and that I intend to operate, along with the year, make, vehicle identification number, and license plate number of each vehicle.</p>																											
<p>I petition the court for a 50% reduction of cost of installing and maintaining a court-ordered ignition interlock device on the vehicle(s) that I own or that is/are registered in my name and that have not been exempted from the IID Order.</p> <p>I petition the court for a 50% reduction of cost of installing and maintaining a court-ordered ignition interlock device on the vehicle(s) listed above that are not registered in my name, that I intend to operate, and that must be equipped with an ignition interlock device for me to legally operate.</p>																											
<p>I have attached a completed form TR-309, Order For Half-Priced Ignition Interlock Device (IID), for the court to sign if my petition is granted.</p>																											
<p>I petition the court for an ignition interlock exemption for the following vehicle(s) that I own or that are registered in my name for the reasons stated (vehicle no. should match vehicle no. identified in first section above):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">NO.</th> <th style="width: 15%;">YEAR</th> <th style="width: 20%;">MAKE</th> <th style="width: 60%;">REASON</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>			NO.	YEAR	MAKE	REASON	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____					
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<p>I own more than 4 vehicles and have attached a list of all of the other vehicles that I own with the year, make, and reason that I am seeking an ignition interlock exemption.</p> <p>I have attached a completed form MV3617, Order For Ignition Interlock Exemptions and Removing Title Transfer Stops, for the court to sign if my petition is granted.</p>																											

I am presently employed: Yes No

Employer's Name: _____

Occupation/Job Title: _____

Employer's Address: _____

Hours/Week: _____

Hourly Rate: _____

I have the following gross monthly income from each source checked in the amount stated:

Wages \$ _____

Student Loans/Grants \$ _____

Child Support/Maintenance \$ _____

Social Security \$ _____

Disability Benefits \$ _____

Supplemental Security Income \$ _____

Food Stamps \$ _____

Unemployment Compensation \$ _____

Medical Assistance \$ _____

Veterans Benefits \$ _____

Pension/Retirement \$ _____

Other \$ _____

Public Assistance/Relief \$ _____

TOTAL GROSS MONTHLY INCOME \$ _____

I have attached the **required financial proof** – such as a copy of any pay stubs received in the past 30 days or the most recent notice showing the amount of SSI or other benefits – for each item of income reported above.

I am married: Yes No

My spouse is presently employed: Yes No

Employer's Name: _____

Occupation/Job Title: _____

Employer's Address: _____

Hours/Week: _____

Hourly Rate: _____

My spouse has the following gross monthly income from each source checked in the amount stated:

Wages \$ _____

Student Loans/Grants \$ _____

Child Support/Maintenance \$ _____

Social Security \$ _____

Disability Benefits \$ _____

Supplemental Security Income \$ _____

Food Stamps \$ _____

Unemployment Compensation \$ _____

Medical Assistance \$ _____

Veterans Benefits \$ _____

Pension/Retirement \$ _____

Other \$ _____

Public Assistance/Relief \$ _____

TOTAL GROSS MONTHLY INCOME \$ _____

I have attached the **required financial proof** – such as a copy of any pay stubs received in the past 30 days or the most recent notice showing the amount of SSI or other benefits – for each item of income reported above.

The following persons presently reside in my household in addition to myself and my spouse:

Name: _____ Relationship: _____ Under 18? Yes No

Name: _____ Relationship: _____ Under 18? Yes No

Name: _____ Relationship: _____ Under 18? Yes No

Name: _____ Relationship: _____ Under 18? Yes No

Name: _____ Relationship: _____ Under 18? Yes No

Name: _____ Relationship: _____ Under 18? Yes No

Name: _____ Relationship: _____ Under 18? Yes No

The additional members of my household listed above have a combined gross monthly income from each source checked in the amount stated:

Wages	\$ _____	Student Loans/Grants	\$ _____
Child Support/Maintenance	\$ _____	Social Security	\$ _____
Disability Benefits	\$ _____	Supplemental Security Income	\$ _____
Food Stamps	\$ _____	Unemployment Compensation	\$ _____
Medical Assistance	\$ _____	Veterans Benefits	\$ _____
Pension/Retirement	\$ _____	Other	\$ _____
Public Assistance/Relief	\$ _____	TOTAL GROSS MONTHLY INCOME	\$ _____

The Internal Revenue Service (IRS) defines a member of household as a person who is related to you or lives with you for the entire year as a member of your household except for temporary absences, such as vacation or school.

I have attached the **required financial proof** – such as a copy of any pay stubs received in the past 30 days or the most recent notice showing the amount of SSI or other benefits – for each item of income reported above that is received by an adult member of my household.

SUMMARY OF GROSS MONTHLY INCOME

My gross monthly income is: \$ _____

My spouse's gross monthly income is: \$ _____

The additional members of my household gross monthly income is: \$ _____

TOTAL GROSS MONTHLY INCOME for my household: \$ _____

CONTACT INFORMATION

Name: _____ Telephone (day): _____

Address: _____ Telephone (evening): _____

_____ Telephone (cell): _____

City: _____ State: _____ Zip Code: _____

I understand that an ignition interlock device is required for every vehicle that I own or that is registered in my name unless the vehicle is specifically exempted by the court.

I understand that my operating privilege is restricted by court order and that while I am under that order I cannot legally operate any motor vehicle – including one that is borrowed, rented, leased, or exempted – unless it is equipped with an ignition interlock device.

I certify that the information provided above is true. I understand that I may be required to testify under oath about the information I have provided and about my financial situation.

SIGNATURE

DATE SIGNED

FINDINGS AND ORDER

Based on the petition and other information provided to the Court by the defendant, the Court finds as follows:

Cost Reduction

Defendant has a household income that is at or below 150% of the federal poverty guidelines, and the petition is granted. **Petitioner is directed to prepare and submit an Order for Half-Priced Ignition Interlock Device (IID), Form TR-309, consistent with the Court's findings to the Court for the Court's signature.**

OR

Defendant has a household income that exceeds 150% of the federal poverty guidelines and the petition is denied.

Vehicle Exemption

The petition for vehicle exemption is granted. **The petitioner is directed to prepare and submit an Order for Ignition Interlock Exemptions and Removing Title Transfer Stops, Form MV3617, consistent with the Court's findings to the Court for the Court's signature.**

OR

The petition for vehicle exemption is granted in part and denied in part. The petition is granted for vehicle nos. _____ . The petition is denied for vehicle nos. _____ for the following reasons: _____

The petitioner is directed to prepare and submit an Order for Ignition Interlock Exemptions and Removing Title Transfer Stops, Form MV3617, consistent with the Court's findings to the Court for the Court's signature.

OR

The petition for vehicle exemption is denied for the following reasons: _____

BY THE COURT:

Dated: _____

Circuit Court Judge