STATE OF NORTH CAROLINA				File No.		
County				In The General Court Of Justice District Court Division		
IN THE MATTER OF: Name And Address Of Petitioner				PETITION FOR LIMITED DRIVING PRIVILEGE Driving While License Revoked OR Committing Moving Offense While Driving During		
Race	Sex	Height	Weight	Period Of Revocation		
Hair Colo	or Eye Color	Date Of Birth		G.S. 20-20.1 Drivers License No. And State		
Offense(s G.S. 20-2		as Revoked At Time Of Char	ge Under G.S. 20-28 Or	Date(s) And Jurisdiction(s) Of Offense(s)		
Offense(s) Petitioner Was Convi	icted Of Committing During Pe	eriod Of Revocation	Date(s) And Jurisdiction(s) Of Offense(s)		
NOTE	Use this form to per revoked) or G.S. 2 you reside. Attach	etition the court for a limite 0-28.1 (committing moving a copy of your driving reco	d driving privilege und g offense while driving ord, certified by the N	ements must be satisfied when this Petition is filed. der G.S. 20-20.1 for a revocation under G.S. 20-28 (driving while license during period of revocation). Complete this form and file it in the county in which orth Carolina Division of Motor Vehicles. If the judge determines that a limited for the limited driving privilege.		
the fo	llowing:			riving privilege for the revocation indicated below and hereby present		
1.	_	evoked by the North Ca		lotor Vehicles under		
	<u> </u>	Iriving while license reve (committing moving offe	,	during period of revocation).		
	The revocation b	ecame effective on (dat	e)			
2. The revocation is						
☐ for one year and I have complied with the revocation for at least 90 days.						
	for two years and I have complied with the revocation for at least one year. a permanent revocation and I have complied with the revocation for at least two years.					
 The offense for which my drivers license was revoked when I was charged under G.S. 20-28 or G.S. 20-28.1 was not an offense involving impaired driving. My drivers license is revoked under G.S. 20-28.1 and the moving offense that I was convicted of committing during a period of revocation was not an offense involving impaired driving. 						
4.	 The revocation for the offense for which my drivers license was revoked when I was charged under G.S. 20-28 or G.S. 20-28.1 has expired. 					
5. The revocation of my drivers license under G.S. 20-28 or G.S. 20-28.1 is the only revocation currently in effect.						
6.	6. I am not eligible to receive a limited driving privilege under any law other than G.S. 20-20.1.					
7.	 I have not held a limited driving privilege issued under G.S. 20-20.1 at any time during the three years prior to the date of this petition. 					
8.	8. I have no pending charges for any motor vehicle offense in North Carolina or any other state and I have no unpaid motor vehicle fines or penalties in North Carolina or any other state.					
9.	9. My drivers license issued by another state has not been revoked by that state.					

10. Neither G.S. 20-9(e) (person afflicted with or suffering from physical or mental disability or disease that prevents person from exercising reasonable and ordinary control over a motor vehicle, or person unable to understand highway warnings or direction signs) nor G.S. 20-9(f) (person whose drivers license or driving privilege is in state of cancellation, suspension or revocation in any jurisdiction, where acts or things upon which cancellation, suspension or revocation in other jurisdiction was based would constitute lawful grounds for cancellation, suspension or revocation in North Carolina had those acts or things been done or committed in North Carolina) would prohibit the North Carolina Division of Motor Vehicles from issuing me a drivers license.							
11. I have att	11. I have attached to this petition a copy of my driving record, certified by the North Carolina Division of Motor Vehicles.						
12. I have attached a properly executed form DL-123 or equivalent proof that I am financially responsible.							
a properly executed form DL-123A stating that I am not required to furnish proof of financial responsibility.							
SWORN STATEMENT							
I hereby certify that I am eligible for a limited driving privilege under G.S. 20-20.1.							
SWORN/AFFIF	RMED AND SUBSCRIBED TO BEFORE ME	Date					
Date	Signature Of Person Authorized to Administer Oaths	Signature Of Petitioner					
Magistrate	Assistant CSC						
Deputy CSC	Clerk Of Superior Court Date My Commission Expires						
Notary	County Where Notarized						
SEAL							