

**FAMILY COURT SERVICES
501 WEST ADAMS STREET, ROOM 2150
JACKSONVILLE, FL 32202
(904) 255-1060 MAIN**

**CHECKLIST FOR:
MOTION TO REINSTATE YOUR DRIVERS LICENSE**

Use this form if you have received a notice from the Department of Revenue/Child Support Enforcement (DOR/CSE) informing you that they have suspended your Drivers License.

You may obtain the following forms at:

www.flcourts.org - (select) - Self Help, Family Law Forms

ALL FORMS MUST BE COMPLETED TO START YOUR CASE

- Local Form (attached)
 - Motion to Reinstatement Drivers License
- Form 12.900(h)
 - Notice of Related Cases (**Must be Filed**)
- PRINTOUT of your 'Pay History' from the Domestic Relations Depository (DRD) (1st Floor).

INSTRUCTIONS:

1. **Fully complete** the provided form.
2. Make sure your form is **notarized**.
3. Make **three (3) copies** of each form.
4. File your **original documents**, completed and notarized to:
Room 2474 - Clerk of Court Family Law
5. **NEXT** the (3) copies you made...
 - (1) COPY - YOU KEEP FOR YOURSELF
 - (1) COPY - OTHER PARTY
 - (1) COPY - CERTIFIED MAIL WITH A RETURN RECEIPT to:
 - **DEPARTMENT OF REVENUE
CHILD SUPPORT ENFORCEMENT UNIT
ATTN: Service Center Manager
Bldg. A - Room 150
921 N. Davis Street
Jacksonville, FL 32209**

HOW TO NOTIFY BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Make sure you obtain the following with your form and follow instructions:

- (1) Envelope
- (1) 'Green Card' for certified mail
- (1) 'White Receipt' for return receipt requested
- Local Form
***Notice of Service to Department of Revenue/Child Support Enforcement (DOR/CSE)**

INSTRUCTIONS:

1. Go to the nearest U.S. Post Office with your envelope with attached green card and receipt.
2. After the copy of your motion has been delivered to DOR/CSE, the Post Office will send you back the 'Green Card' to inform you that it was received.
3. Attach this green card along with the local form and file it with the Clerk of the Courts, Family Law, Room 2474

IN THE CIRCUIT COURT OF THE FOURTH JUDICIAL CIRCUIT
IN AND FOR DUVAL COUNTY FLORIDA

CASE NO.: 16- -DR- -FM
DIVISION: FM-

Petitioner
And

Respondent

NOTICE OF SERVICE TO
DEPARTMENT OF REVENUE/CHILD SUPPORT ENFORCEMENT (DOR/CSE)
BY CERTIFIED MAIL RETURN RECEIPT REQUESTED

I **HERE BY CERTIFY** that the Dept. of Revenue/Child Support Enforcement Unit was served with a copy of:

_____ Motion _____
(full name of pleading)

_____ Other Documents/Forms _____

By Certified Mail, Return Receipt Requested, Receipt No _____,
at Department of Revenue/Child Support Enforcement, Attn: Service Center Manager, Bldg. A – Room 150, 921 N. Davis Street, Jacksonville, FL 32209, on *(month and day)* _____, 20____ as shown by the signed certified mail card (attached to this notice).

Signature
Address: _____

Telephone: _____

ATTACH CERTIFIED MAIL CARD HERE

IN THE CIRCUIT COURT OF THE FOURTH JUDICIAL CIRCUIT
IN AND FOR DUVAL COUNTY, FLORIDA

CASE NO.: _____
DIVISION: _____

_____,
Petitioner,

And

_____,
Respondent,

MOTION TO REINSTATE DRIVER'S LICENSE

COMES NOW the () Petitioner () Respondent _____
in this matter, and requests the Court to direct the Department of Revenue/Child Support
Enforcement (DOR/CSE) to reinstate the suspension of my Florida Driver's License. In support
of this motion, I state the following as grounds:

CERTIFICATE OF SERVICE

I certify that a copy of this document was () mailed () faxed and mailed () e-mailed ()
hand-delivered to the person(s) listed below on {date} _____.

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

Fax Number: _____

Designated E-mail Address(es): _____

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this answer and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Date: _____

Signature of Party

Printed Name: _____

Address: _____

Tel. No.: _____

E-Mail: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name or notary or clerk.]

_____ Personally known

_____ Produced identification

Type of Identification produced _____