

**IN THE MUNICIPAL COURT OF TOLEDO, LUCAS COUNTY, OHIO**

**Motion for Limited Driving Privileges**

**Two of the four identifiers below are required.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
BMV Case Number

\_\_\_\_\_  
Driver's License Number

\_\_\_\_\_  
Date of Birth

XXX - XX -

\_\_\_\_\_  
Last Four Digits of Social Security

-vs-

**State of Ohio  
Bureau of Motor Vehicles  
PO Box 16520  
Columbus, Ohio 43216-6520**

Now comes the Petitioner and states that on or about the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the Defendant, State of Ohio, Bureau of Motor Vehicles, issued a Notice of Suspension of Petitioner's Driver's License for the following reason(s):

\_\_\_\_\_ First or Second Non Compliance (No Proof of Insurance)

\_\_\_\_\_ DUI/Drug Offense out of State

\_\_\_\_\_ Reinstatement Fee Plan

The suspension to be in effect starting \_\_\_\_\_.

\_\_\_\_\_  
Petitioner/Attorney Signature

\_\_\_\_\_  
Date