



COURT OF COMMON PLEAS UNION COUNTY

DON W. FRASER
JUDGE

SCOTT NELSON BARRETT
CHIEF MAGISTRATE

MELISSA A.B. WILT
MAGISTRATE

INSTRUCTIONS FOR OBTAINING LIMITED DRIVING PRIVILEGES

If the Union County Court of Common Pleas has suspended your driver's license as a result of a criminal conviction in this Court you may be eligible to apply for limited driving privileges. Please fill out the attached Application for Limited Driving Privileges, file it with the Clerk of Courts and mail a copy to the Union County Prosecutor. Please keep in mind the following:

1. Adequate proof of current liability insurance must be shown before any application for limited driving privileges will be considered.
2. A filing fee of \$25.00, payable to the Clerk of Courts, must accompany your Application.
3. If you are requesting limited driving privileges for travel to and from your place of education or employment you must clearly indicate the hours you will be traveling for such education or employment.
4. Ohio law allows limited driving privileges to be granted for (1) Occupational, educational, vocational, or medical purposes; (2) Taking the driver's or commercial driver's license examination; (3) Attending court-ordered treatment; (4) Attending any court proceeding related to the offense for which the offender's suspension was imposed; (5) Transporting a minor to a child care provider, day-care, preschool, school, or to any other location for purposes of receiving child care; (6) Any other purpose the court determines to be appropriate.
5. If you are requesting limited driving privileges to take the driver's or commercial driver's license examination, please specify the reason(s) that you need to take the examination on a separate sheet of paper that you sign and attach to the form below.
6. Once privileges have been granted, applicants must carry a copy of the Order with them at all times. Additionally, a detailed travel log documenting the date, time, and destination of all travel must be kept. If pulled over by police, the burden is on the holder of the privileges to prove they were operating within them.

Judge Don W. Fraser



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APPLICATION FOR LIMITED DRIVING PRIVILEGES

Full Name: _____ Cases No.: _____

Address: _____

Phone #: _____ SSN #: _____ DOB: _____

Driving Privileges are necessary for: Work School Other: _____

Name and address of Employer/School: _____

Job Title: _____

Are you required to drive during the course of employment? Yes No

Supervisor Name and Phone Number: _____

Are you under suspension from any other Court or state agency? Yes No

Do you have Liability Insurance as required by law? Yes No

(NOTE: You must provide a copy of your liability insurance before any driving privileges can be granted.)

Name and address of insurance company: _____

I certify the above information to be true in fact: _____

Applicant's Signature



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On this page, please indicate the approximate time(s) of day you would be traveling for the purposes outlined in the instructions for this application.

Monday: _____

Tuesday: _____

Wednesday _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____
