Gregory L. Rikard
Justice of the Peace
Galveston County, Pct. 1

Occupational Driver's License Procedures

Before beginning, it is recommended that you contact the Texas Department of Public Safety at (512)424-2600 regarding eligibility for an Occupational Driver's License. A filing fee **will not** be refunded due to the denial of a Petition/Application for Occupational Driver's License.

1. You must complete the Petition for Occupational Driver's License except for the Cause Number, and the last page, unless you intend to use a notary.

2. You are required to obtain SR-22 Insurance Coverage. Please contact your insurance company for proof of coverage. Proof of SR-22 must be shown before your case is set.

3. You are required to obtain and provide a **Certified Abstracts of Driving Record (Type AR)** at the time of filing. You may access the following website to apply for your required driving record: http://www.dps.texas.gov/DriverLicense/driverrecords.htm You must obtain and show you **Certified Abstracts of Driving Record (Type AR)** before you case is set

4. The filing fee is $46.00. An additional fee will be due after the hearing for certified copies of the order. We accept **money orders and cashier's check.**

5. When **Petition, SR22 and Certified Abstracts of Driving Record (Type AR)** and **fee of $46.00** are received the clerk will give you a hearing date.

CAUSE NO. _____

	§	**IN THE JUSTICE COURT**
	§	
EX PARTE	§	**PRECINCT NO 1**
	§	
_____	§	**GALVESTON COUNTY, TEXAS**
(Name of Petitioner)		

PETITION FOR OCCUPATIONAL LICENSE

I, _____ *(Name of Petitioner)*, seek an occupational license from this court based on the information provided below. *(You must swear that the information you provide in this petition is true and correct. Failure to provide true and accurate information may result in criminal penalties.)*

Section 1. General Information.

You must complete all applicable sections.

My name is: _____.

My date of birth is: _____.

I am a resident of _____ County, Texas.

My home address is: _____

_____.

My mailing address (if different than above) is: _____

_____.

My Texas driver's license number is: _____.

- ☐ I am employed, and my occupation is _____

  _____.

- ☐ I am the primary caretaker of _____ children less than 16 years of age.
- ☐ I have been ordered by a magistrate to install an ignition interlock device on my vehicle, and/or not to operate any vehicle which is not equipped with an ignition interlock device.
- ☐ I have not been ordered by a magistrate to install an ignition interlock device on my vehicle, and/or not to operate any vehicle which is not equipped with an ignition interlock device.
- ☐ I have a commercial driver's license.
- ☐ I do not have a commercial driver's license.

Section 2. Reason(s) for Driver's License Suspension.

You must complete all applicable sections.

- ☐ My driver's license has been suspended as the result of an arrest for an intoxication-related offense in _____ County, because:
  - ☐ A peace officer requested a sample of my breath or blood and I refused; or
  - ☐ I provided a sample of my breath or blood, and the sample contained an alcohol concentration greater than 0.08.
- ☐ My driver's license has been automatically suspended as the result of a conviction for Driving While Intoxicated (DWI) in a County or District Court.
- ☐ My driver's license has been suspended as the result of a conviction for a criminal offense in a justice or municipal court. *Please provide information regarding this offense, including the name of the court in which you were convicted, the cause number, and the type of offense, below.*

  _____

  _____

  _____
- ☐ My driver's license has been suspended as the result of a physical or mental disability.
- ☐ My driver's license has been suspended as the result of a conviction for Racing on a Highway.
- ☐ My driver's license has been suspended because a court found that I am a "habitual violator of traffic laws."
- ☐ My driver's license has been suspended because a court ordered me to attend a Driver Education Program and suspended my license for 365 days.
- ☐ My driver's license has been suspended for another reason, described below:

  _____

  _____

  _____

Section 3. Essential Need.

You must complete all applicable sections.

(Note: In order to obtain an occupational license, you must demonstrate an essential need to operate a motor vehicle. The Texas Transportation Code defines "essential need" as the "need of a person for the operation of a motor vehicle: (A) in the performance of an occupation or trade or for transportation to and from the place at which the person practices the person's occupation or trade; (B) for transportation to and from an educational facility in which the person is enrolled; or (C) in the performance of essential household duties." In order to demonstrate an essential need to operate a motor vehicle, you may attach additional documentation, such as a letter from your employer. If you attach additional documentation, be sure to check the appropriate box in Section 5 of this petition.)

- ☐ I am seeking this occupational license in order to *(check all that apply)*:
  - ☐ Travel to and from my place of work;
  - ☐ Perform the duties of my job;
  - ☐ Travel to and from school; or
  - ☐ Perform essential household duties.

In the space below, provide an address and description for any destination you seek to travel to using an occupational license.

_____

_____

_____

_____

In the space below, fully describe all public transportation options within one mile of any destination described above, including your home, place of work, school, or place where you perform essential household duties. Public transportation options may include bus service, rail service, rural automobile service, ride-sharing services, etc.

_____

_____

_____

- ☐ I am the only member of my household who owns, leases, or has access to a motor vehicle.
- ☐ A member of my household other than me owns, leases, or has access to a motor vehicle. *(Please describe this person's weekly schedule below.)*

_____

_____

_____

☐ I own a bicycle or other means of non-motorized conveyance, described below.

_____

_____

☐ My work or school schedule is the same every week: I work or attend school during the following hours on the following days of the week *(check all that apply)*:

- ☐ Monday: from _____ to _____
- ☐ Tuesday: from _____ to _____
- ☐ Wednesday: from _____ to _____
- ☐ Thursday: from _____ to _____
- ☐ Friday: from _____ to _____
- ☐ Saturday: from _____ to _____
- ☐ Sunday: from _____ to _____

☐ My work or school schedule varies from week to week. *(If you check this box, provide a general description of your work or school schedule below, including the total number of hours you work or attend school each week, days of the week on which you never work or attend school, days of the week on which you always work or attend school, and the earliest time your work or school day begins and the latest time your work or school day ends.)*

_____

_____

_____

☐ My job duties include automobile travel. My employer requires me to travel by automobile to perform the following tasks:

_____

_____

_____

☐ I perform the following essential household duties:

_____

_____

_____

In order to perform the essential household duties described above, I must travel by automobile during the following hours on the following days of the week *(check all that apply)*:

- ☐ Monday: from _____ to _____
- ☐ Tuesday: from _____ to _____
- ☐ Wednesday: from _____ to _____
- ☐ Thursday: from _____ to _____
- ☐ Friday: from _____ to _____
- ☐ Saturday: from _____ to _____
- ☐ Sunday: from _____ to _____

☐ In order to:

- ☐ Travel to school;
- ☐ Travel to my place of work;
- ☐ Perform my job duties; or
- ☐ Travel to the place I perform essential household duties;

I must travel by automobile to or through the following Texas counties *(please fully describe all counties and routes traveled)*:

_____

_____

_____

Section 4. Suspension History

You must complete all applicable sections.

My driver's license has previously been suspended for:

- ☐ A second or subsequent conviction for Driving While Intoxicated (Section 49.04, Penal Code); Intoxication Assault (Section 49.07, Penal Code), or Intoxication Manslaughter (Section 49.08, Penal Code), committed within five years of a previous conviction for Driving While Intoxicated (Section 49.04, Penal Code); Intoxication Assault (Section 49.07, Penal Code), or Intoxication Manslaughter (Section 49.08, Penal Code).

In the past five years, my license has been suspended for:

- ☐ A refusal to submit to the taking of a breath or blood specimen following an arrest for an offense prohibiting the operation of a motor vehicle or an offense prohibiting the operation of a watercraft while intoxicated, under the influence of alcohol, or under the influence of a controlled substance.
- ☐ An analysis of a breath or blood specimen showing an alcohol concentration of .08 or above, following an arrest for an offense prohibiting the operation of a motor vehicle or watercraft while intoxicated.
- ☐ A conviction for Driving While Intoxicated (Section 49.04, Penal Code); Intoxication Assault (Section 49.07, Penal Code), or Intoxication Manslaughter (Section 49.08, Penal Code).
- ☐ A conviction for an offense other than Driving While Intoxicated (Section 49.04, Penal Code); Intoxication Assault (Section 49.07, Penal Code), or Intoxication Manslaughter (Section 49.08, Penal Code) prohibiting the operation of a motor vehicle or watercraft while intoxicated, under the influence of alcohol, or under the influence of a controlled substance.

Section 5. Additional Documents.

You must complete all applicable sections.

- ☐ I have obtained evidence of financial responsibility, which is attached to my petition. *(Note: You may not be issued an occupational license unless you obtain evidence of financial responsibility.)*
- ☐ I have attached a certified copy of my driving record to this petition. *(Note: the court cannot grant your petition without reviewing your driving record.)*
- ☐ I have attached documents which demonstrate my essential need to operate a motor vehicle.
- ☐ I have attached other documents, which are described below:

  _____

  _____

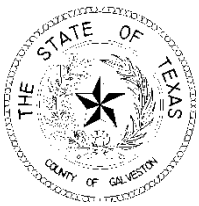
  _____

PRAYER

WHEREFORE, PREMISES CONSIDERED, Petitioner prays that this Honorable Court grant this Petition for Occupational License, and to send a copy of its order granting petitioner's occupational license to the Department of Public Safety of Texas.

_____
Petitioner's Signature

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS _____ DAY OF _____, 20_____.



_____
Notary Public or Clerk of the Justice Court