Honorable JaPaula C. Kemp Justice of the Peace Precinct 2, Place 2
Fort Bend County, Texas

Occupational Driver's License Petition Requirements You MUST include the following with your Petition:

1. Petition by Applicant for Occupational Driver's License.
2. Letter from employer that includes location of employment, hours of operation and the essential need for transportation to and from the place. If a student, you must provide a class schedule from the school of attendance.
3. SR-22
4. Certified Abstract (Type AR) Driving Record
5. Court Costs in the amount **of $54.00** due at the time of filing

Form of payment: Cashier's check or Money order payable to **JP 2-2**

THE COURT IS PROHIBITED FROM GRANTING A PERSON AN OCCUPATIONAL LICENSE FOR THE OPERATION OF A COMMERCIAL MOTOR VEHICLE

You may purchase a copy of your Certified Abstract Driving Record (Type AR) online from the DPS website: http://dps.texas.gov/DriverLicense/driverrecords.htm

To purchase your Certified Abstract Driving Record (Type AR) by mail, please fill out the following form and mail to DPS along with payment. The form is available here: https://www.dps.texas.gov/intemetforms/Forms/DR-l.pdf

Completed petitions containing all the necessary information will be reviewed by the Judge and may be granted without a hearing. Incomplete petitions may require a hearing to determine the necessary information.

If a hearing is not necessary, you will be notified by the Court of a date to appear and pick up a certified copy of the Order. (Fees will apply for certified copies.)

Submit all documents to:

- Physical Address: 3114 Rosenberg St. Needville, Tx 77461
- Mailing Address: 301 Jackson St., Richmond, Texas 77469

Phone: 346-481-6990 | Fax: 832-471-3821
Email: JP2-2.court@fbctx.gov

CAUSE NO. _____

	§	IN THE JUSTICE COURT
	§	
	§	
	§	PRECINCT 2, PLACE 2
	§	
_____	§	
PETITIONER	§	FORT BEND COUNTY, TEXAS

PETITION FOR OCCUPATIONAL LICENSE

I, _____*(name),* seek an occupational driver's 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 One - General Information

My name is: _____

My date of birth is: _____

I am a resident of Fort Bend County, Texas.

My home address is:

_____

_____

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

_____

_____

My Texas driver's license number is: _____

Phone number: _____ E-mail: _____

(*Check all provisions that apply)*

☐ I am employed or looking for work, and my occupation is _____
☐ I am a student at _____

☐ I am the primary caretaker of _____*(number)* dependents who cannot drive.

☐ I have been ordered by a magistrate or other Court order 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 or other Court order 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.

Section Two - Reason(s) for Driver's License Suspension (*Check all provisions that apply)*

☐ My driver's license has been suspended as the result of an arrest for an intoxication-related offense _____ *(name of county)* 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 revoked for failure to pay child support.

☐ 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 for another reason, described below:

_____

_____

_____

_____

_____

_____

_____

Section Three- Essential Need

(Note: 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: 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; for transportation to and from an educational facility in which the person is enrolled; or in the performance of essential household duties." 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 Five of this petition.)

I am seeking this occupational license 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.

I am not seeking an occupational license to drive a commercial motor vehicle.

The following are addresses and descriptions of all destinations where I am requesting to travel with my occupational license:

To reach the destinations described above, I must travel to or through the following Texas counties *(please fully describe all counties and routes traveled):*

Below, I have fully described all public transportation options within one mile of any destination described above, including my home, place of work, school, or place where I perform essential household duties. *(Public transportation options may include bus service, rail service, rural automobile service, ride-sharing services, etc.)*

(Check the provision(s) that apply)

☐ 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: _____
- ☐ Tuesday: _____
- ☐ Wednesday: _____
- ☐ Thursday: _____
- ☐ Friday: _____
- ☐ Saturday: _____
- ☐ Sunday: _____

☐ 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:

_____

_____

_____

_____

_____

☐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:

_____

☐ Tuesday:

_____

☐ Wednesday:

_____

☐ Thursday:

_____

☐ Friday:

_____

☐ Saturday:

_____

☐ Sunday:

_____

Section Four - Suspension History

In the past five years, my license has been suspended for *(check all provisions that apply):*

☐ A refusal to submit to tlie 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 sho:,ving 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 (Penal Code§ 49.04); Driving While Intoxicated with Child Passenger (Penal Code§ 49.045); Flying While Intoxicated (Penal Code§ 49.05); Boating While Intoxicated (Penal Code § 49.06); Assembling or Operating an Amusement Ride While Intoxicated (Penal Code § 49.065); Intoxication Assault (Penal Code § 49.07); or Intoxication Manslaughter (Penal Code§ 49.08).

Section Five -Additional Documents (*Check all provision that apply)*

☐ I have obtained evidence of financial responsibility *(automobile liability insurance-SR22),* 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 Type AR certified abstract of my driving record to this petition. *(Note: the Court cannot grant your petition without reviewing your driving record.)*

☐ I have attached documents demonstrating my essential need to operate a motor vehicle.

☐ I have attached other documents, which are described below:

_____

_____

Petitioner requests that the Court grant this Petition for Occupational License, and send a certified copy of this Petition, along with its order granting petitioner's occupational license, to the Texas Department of Public Safety.

_____
Petitioner's Signature

SWORN TO AND SUBSCRIBED before me on _____

_____
CLERK OF THE JUSTICE COURT ORTEXAS NOTARY

IF YOU ARE UNABLE TO HAVE THIS PETITION SIGNED IN THE PRESENCE OF A NOTARY PUBLIC, YOU MUST COMPLETE THE FOLLOWING UNSWORN DECLARATION:

My current legal name is:_____
First Middle Last

My date of birth is: _____ I _____ I _____
Month Day Year

My address is_____
Street Address City State Zip Code County

I **declare under penalty of perjury that the foregoing is true and correct.**

Executed in._____County, State of Texas, on the_____ day of _____.

_____
Petitioner/Declarant's Signature