	County				In The General Court Of Justice District Court Division		
	IN THE	MATTER OF:					
nme And Address Of Petitioner				LIM	LIMITED DRIVING PRIVILEGE		
				Dr	riving While	License Revoked	
				Committing	a Movina Off	Or fance While Driving During	
nce	Sex Height Weight			Committing Moving Offense While Driving During Period Of Revocation			
	Jour	ricigit	Weight			G.S. 20	
ir Color	Eye Color	Date Of Birth		Drivers License No.		State	
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LIMITED DRIVING PRIVILEGE
The driver shall not consume alcohol while driving or drive at any time while the driver has remaining in his or her body any previously consumed alcohol. The driver shall not drive at any time while the driver has remaining in his or her body any previously consumed controlled substance, unless the controlled substance was lawfully obtained and taken in therapeutically appropriate amounts. The driver must maintain financial responsibility as required by G.S. 20-20.1(i) during the period of this limited driving privilege. This limited driving privilege DOES NOT include the privilege of operating a commercial motor vehicle as defined in G.S. 20-4.01(3d). Driving when essential for the emergency medical care of the driver, or for an immediate family member of the driver who resides in the same household with the driver, is authorized at any time. Standard working hours are 6:00 AM to 8:00 PM, Monday through Friday.
Driving, other than for emergency medical care, is permitted only as follows: (check only applicable boxes)
Driving is permitted for work-related purposes during standard working hours as follows:
Driving is permitted for maintenance of household during standard working hours as follows:
3. Driving is permitted for work-related purposes during nonstandard working hours as follows:
☐ The driver is self-employed and the required documentation for work-related driving is attached.
4. Driving is restricted to any non-commercial vehicle registered in the name of the driver.the following non-commercial vehicle(s):
☐ 5. Additional restrictions: ☐ Corrective Lenses ☐ 45 M.P.H. ☐ Daylight Only ☐ Other: (specify)
Name And Address Of Employer Or Driver's Place Of Work
NOTICE/ACKNOWLEDGMENT OF RECEIPT
I have received a copy of this limited driving privilege, which contains the restrictions on my privilege to drive. I understand that if I drive with the odor of alcohol on my breath, I may be subject to arrest and to the loss of this limited driving privilege. I also understand that this is my limited license to drive; that I must keep it in my possession during the period of revocation; that if my drivers license is revoked for any other reason, this limited driving privilege is invalid; and that a violation of any restriction imposed in connection with this limited driving privilege constitutes the offense of driving while license revoked under G.S. 20-28(a).
Oate Signature Of Petitioner
CERTIFICATION
I certify that this is a true and complete copy of the original on file in this case.
Date Signature Deputy CSC Assistant CSC Clerk Of Superior Court
NOTE TO CLERK: The clerk must send a copy of this limited driving privilege, and a copy of any subsequent order modifying or revoking this limited driving privilege, to the North Carolina Division of Motor Vehicles.

AOC-CV-354, Side Two, New 12/07 © 2007 Administrative Office of the Courts