

**JASPER COUNTY DWI COURT
APPLICATION FOR CHANGES TO AN EXISTING LIMITED DRIVING PRIVILEGE**

Applicant's Name: _____

Applicant's Address: _____

Applicant's Phone Number: _____

Change(s) Requested: _____

Reason for Request: (i.e. moving, job change): _____

Date Change Will Take Effect: _____

I, _____, understand that any change requires court approval and that operating any vehicle outside of the restrictions of my current issued Limited Driving Privilege (LDP) is illegal and may result in my arrest if I am stopped. I further understand that all requirements including SR-22 must be maintained during the duration of my LDP.

Applicant's Signature

Date

Office Only:

Date Received: _____ Date Approved: _____

Date Amended LDP Issued: _____