

**LICKING COUNTY MUNICIPAL COURT
40 WEST MAIN STREET
NEWARK, OHIO 43055
CIVIL DIVISION**

_____ (name)
_____ (street address)
_____ (P.O. Box, if any)
_____ (city, state and zip code),

Plaintiff

BMV Case No. _____

vs.

Case No. _____

Registrar's Office
C/O Bureau of Motor Vehicles
P.O. Box 16520
Columbus, Ohio 43216,
Defendant

PETITION TO MODIFY 12 POINT SUSPENSION

1. Now comes the Plaintiff, _____, and states that he/she resides within the jurisdiction of this court. The Plaintiff further states on or about _____, he/she received notice from the State of Ohio advising his/her driver's license will be suspended under Ohio Revised Code, Section 4507.021(K), effective on or about _____.

THIS PARAGRAPH IS OPTIONAL: (DEPENDS ON WHETHER YOU FILED WITHIN THE TWENTY DAY TIME FRAME) EXCLUDE THIS PARAGRAPH IF YOU DID NOT FILE WITHIN THE TWENTY DAY TIME FRAME

2. The Plaintiff states that he/she filed this complaint within the required twenty days from mailing of said notice of suspension.

3. The Plaintiff can show why he/she should not be suspended.

4. The Plaintiff states that his/her employment is of such nature that his/her ability to continue employment would be seriously affected if the suspension otherwise required under Ohio Revised Code Section 4507.021(K) be imposed.

5. Plaintiff agrees to pay court costs of said proceedings.

Signature

Street Address

P.O. Box, if any

City, State and Zip Code

Telephone Number

Email Address

CERTIFICATE OF SERVICE

I hereby certify that a correct copy of this Petition to Modify Suspension was sent by regular mail to Registrar, Bureau of Motor Vehicles, P.O. Box 16520, Attention: MVODIP, Columbus, Ohio 43216 AND the Law Director's Office, 40 West Main Street, 4th Floor, Newark, Ohio 43055, this _____ day of _____, _____.

SIGNATURE