

**STATE OF NEW MEXICO
COUNTY OF BERNALILLO
SECOND JUDICIAL DISTRICT COURT**

CASE NO. _____

Petitioner,
vs.

STATE OF NEW MEXICO
TAXATION AND REVENUE DEPARTMENT
MOTOR VEHICLE DIVISION,
Respondent.

PETITION FOR ORDER OF RESTORATION OF DRIVER'S LICENSE

Petitioner asks this court to order restoration of driving privileges, in accordance with § 66-5-5(D) NMSA 1978.

1. The Motor Vehicle Division has withdrawn my privilege to drive because I have had three or more DWI convictions.

2. It has been ___ years or longer since my last conviction for DWI. A current copy of my driving record is attached.

3. My driver's license was revoked for _____ years or _____ (other period) which ended on _____. I have checked my driving record and my revocation period is over.

Since that date, I have not previously petitioned for restoration of my driver's license in this or any other judicial district.

.OR.

Since that date, I have previously petitioned for restoration of my driver's license in case number _____, in the _____ Judicial District Court. That Petition resulted in the following court order: _____

4. I have never been required to have an ignition interlock device and I do not have an interlock license.

.OR.

I have been required to have an ignition interlock device. I have had an interlock license and I am prepared to present evidence that for the previous six months there have been no attempts to circumvent or tamper with the ignition interlock device.

5. I am prepared to present evidence of good cause to restore my driving privileges. This evidence includes the following:

• I have honored the revocation and have not driven during this time.

I no longer consume alcoholic beverages.

I have undergone treatment or counseling so that I am no longer dependent on alcohol.

I have attached evidence of, and explained, where and when I received treatment for substance abuse, attended AA meetings, received assessments, etc., to this

Petition. (Also attach any certificates that you received and any letters from a physician, alcohol counselor, or other professional who can state that you are no longer at risk for substance abuse.)

I have attached letters of recommendation to the Petition.

I will bring witnesses to testify at my hearing.

WHEREFORE the Petitioner requests that the court issue an Order of Restoration of Driving Privileges.

SIGNATURE

NAME (Printed)

ADDRESS

CITY, STATE, ZIP CODE

TELEPHONE

DATE OF BIRTH

MVD License or ID Card Number
(If available)

**YOU MUST SEND A COPY OF THIS DOCUMENT,
AFTER FILING IT WITH THE DISTRICT COURT,
TO:**

Taxation and Revenue Department
Legal Services Bureau
DWI - Legal Section
Post Office Box 630
Santa Fe, NM 87504-0630