STATE OF FLORIDA			COUNTY COURT	
vs		FLAGLE	ER COUNTY, FLORI	DA
Defendant		Citation	ı(s) and/or Case(s)	
REQUEST FOR DRIVING PRIVILEGE REINSTATEMENT				
I have requested a Hearing Date under Florida request a hearing within 180 days after the date up or the department to suspend the person's driving person shall be given a form for requesting that his	oon which the viola g privilege, and, up	tion occurred, re on request, the	egardless of any acti clerk must set the	on taken by the court
I request my driving privileges be reinstated until further order of the Court.				
My mailing address is (please type or print clearly)				
Address				
City, State, Zip + 4				
Phone Number				
Signature			Date	
SWORN TO AND SUBSCRIBED before me this	sc	lay of	, 20	_·
	Ē	eputy Clerk		
Certificate, Ackno	owledgment in an Ind	vidual Capacity (Fl	orida)	
State of Florida  County of  The foregoing instrument was acknowledged before me by means of (how the individual appeared; check one).				
Physical presence or online notari	zation this	day of		, 20
		ate)	(Month)	(Year)
Ву				
(Name of Individual Acknowledging)  Individual Identification by: Personal Knowledge Satisfactory Evidence, Type:				
_	Signature of	Notary Public		
77	ad Daintad as Chass	and Name of Nato	a. Dublia	, Notary Public
(Affix FL Notary Stamp above)	ped, Printed or Stam	ped Name of Nota	ry Public)	
No action taken				
Request Approved With Costs	/ Without Costs			
Request Denied				

Date

Judge's Signature