

Occupational/Restricted Driver License Application

RCW 46.20.391

For validation only. 106-040-254-0005

Eligibility information is on the next page

PRINT OR TYPE —Name of applicant (<i>Last, First, Middle initial</i>)		
How would you like your license sent to you? (Check one only) <input type="checkbox"/> US mail <input type="checkbox"/> email <input type="checkbox"/> Fax		
Delivery information (Mailing address, email, or (Area code) Fax number)		
Date of birth	Driver license number	Social Security number <small>Mandatory for child support laws, 42 USC 666(a), RCW 26.23.150. Kept on file at DOL. Used for identification, 42 USC 405.</small>

IIDL fee _____ Date received _____ LSR initials _____ Office no. _____

Verification of Eligibility—This section must be completed by an authorized individual

Reason for driving Select one reason only. A separate application must be completed for each reason. Applicant needs to drive for: <input type="checkbox"/> Work, including self-employment, WorkFirst, apprenticeship, or on-the-job training. <i>Must be completed by employer, business owner, or a WorkFirst representative.</i> <input type="checkbox"/> School. <i>Must be completed by the school administrator/registrar.</i> <input type="checkbox"/> Court-ordered community service. <i>Must be completed by a representative of the court.</i> <input type="checkbox"/> Substance abuse treatment/ 12-step meetings. <i>Must be completed by the treatment provider or 12-step group leader.</i> <i>Is transit service available?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Continuing healthcare for yourself. <i>Must be completed by your healthcare provider.</i> <input type="checkbox"/> Continuing care of a dependent. <i>Must be completed by the applicant.</i> <i>Name(s) of dependent(s)</i> _____ <i>Relationship to dependent(s)</i> _____ <i>Statement of dependency and need for continuing care:</i> <i>Enclose additional pages if needed. Insufficient explanation may result in a request for additional documents.</i> _____ _____
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Required driving hours (Not over 12 hrs in a 24 hr period) From _____ <input type="checkbox"/> am <input type="checkbox"/> pm To _____ <input type="checkbox"/> am <input type="checkbox"/> pm	Days required <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> T <input type="checkbox"/> F <input type="checkbox"/> S	Geographical driving area (County or city)
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If "Continuing care of a dependent" was selected as the reason above, skip to the "Applicant Declaration" section.

PRINT OR TYPE —Name and title of authorized individual completing this section			
Name of organization (<i>i.e. company, court, medical center, etc.</i>)	UBI or business license number (Employers only)		
Organization street address			
City	State	ZIP code	(Area code) Telephone number
Signature of authorized individual completing this section			
X			Date

Applicant Declaration

Applicant signature <i>I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.</i>	
X	
Date and place	
(Area code) Home telephone number	(Area code) Work telephone number

If your driver license has been suspended or revoked you may be eligible for an Occupational/Restricted License (ORL).

An ORL can be used to drive to:

- work, or for work, including self-employment, WorkFirst, apprenticeship, or on-the-job training.
- school.
- court-ordered community service.
- substance abuse treatment or 12-step meeting if no transit service is available.
- a healthcare provider.
- anywhere that is required to provide continuing care of someone who is dependent on you.

To be eligible:

- you must have had a valid driver license.
- you had no convictions for vehicular assault or vehicular homicide within seven years before the incident for which you are requesting the ORL.
- your suspension/revocation is not for DUI, physical control, minor in possession, vehicular assault or homicide, intermediate license violations, failure to pay child support, fraud, violation of court-ordered probation, medical or vision reasons, habitual traffic offender status, or failure to enter into or comply with a required alcohol/drug treatment program.
- you cannot get an ORL to operate a commercial motor vehicle (Chapter 46.25 RCW).

To apply

Complete a separate application for each reason for driving.

1. Submit proof of financial responsibility with us by filing **one** of these:
 - a Certificate of Insurance (SR-22). *(This is the most common. An insurance agent can help you but you should allow several weeks for the process.)*
 - a State Treasurer's certificate of deposit of \$60,000 or approved collateral of equal value.
 - a surety bond executed by the person giving proof and a surety company duly authorized to do business in this state, or by the person giving proof and by two individual sureties.
2. If you are applying because:
 - of an alcohol-related suspension or revocation, you cannot get an Occupational/Restricted driver license but can apply for an Ignition Interlock driver license.
 - of a conviction, verify that we have record of the conviction on file before you submit your application. We cannot process an application without the conviction on file.
 - you did not pay a ticket or appear in court (FTA), submit proof that you have entered into a payment plan with the court. Each FTA suspension requires proof from the related court.
3. Take this completed application(s) and a \$100 nonrefundable fee to any driver licensing office or mail them to:
Occupational/Restricted License
Department of Licensing
PO Box 9048
Olympia, WA 98507-9048

Waiting period

Once your application is processed and you have met all the requirements, we will mail the ORL to you.

Keeping your ORL

The ORL will restrict:

- the times you may drive.
- the area in which you may drive.

Your ORL will be cancelled if any of the following occurs:

- you are convicted of violating the ORL restrictions.
- your driving privilege is suspended or revoked while the ORL is in effect.
- we receive evidence that your reason for driving is no longer valid.

Questions?

If you have further questions, call customer service at (360) 902-3900 or visit www.dol.wa.gov.