

ROCKY RIVER MUNICIPAL COURT  
21012 HILLIARD BOULEVARD  
ROCKY RIVER, OHIO 44116

MOTION FOR LIMITED DRIVING PRIVILEGES/MOTION TO MODIFY PRIVILEGES  
(circle one)

CASE NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS : \_\_\_\_\_

( ) New Address? \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ NEW ? \_\_\_\_\_

COMMUNITY CONTROL OFFICER: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

DAYS/TIMES: \_\_\_\_\_

\_\_\_\_\_

ANY ADDITIONAL PRIVILEGES (explained on previous page):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand limited driving privileges will be granted conditional upon (1) all pertinent schedules must be carried with me at all times, and (2) insurance must be maintained at all times.

\_\_\_\_\_  
DEFENDANT

\_\_\_\_\_  
DATE