

**Request for Administrative Hearing to  
Contest Suspension, Revocation or Disqualification of Driving Privilege  
or Request Restricted Driving Permit**

NOTICE: IF YOU DESIRE AN ADMINISTRATIVE HEARING BEFORE A FAIR HEARING REFEREE, THE HEARING REQUEST MUST BE POSTMARKED OR FAXED WITHIN SEVEN (7) CALENDAR DAYS OF THIS NOTICE BEING GIVEN OR YOUR REQUEST FOR AN ADMINISTRATIVE HEARING TO CONTEST WILL BE DENIED. YOU MUST FULLY COMPLETE AND MAIL OR FAX THIS FORM TO THE FOLLOWING ADDRESS IN ORDER TO BE SCHEDULED FOR A HEARING.

DRIVER CONTROL SECTION  
P.O. BOX 8078  
LITTLE ROCK, ARKANSAS 72203-8078  
TELEPHONE (501) 682-7212 FAX (501) 682-7109

PRINT OR TYPE ONLY (ILLEGIBLE REQUESTS CANNOT BE SCHEDULED)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/ZIP \_\_\_\_\_

- \* IF YOU DO NOT WANT THE ABOVE ADDRESS TO BE USED ON YOUR DRIVER'S LICENSE RECORD, THEN CHECK THIS BOX.
- \* THE CHANGE OF ADDRESS DOES NOT APPLY TO COMMERCIAL DRIVERS.

HOME TELEPHONE NO. \_\_\_\_\_ WORK TELEPHONE NO. \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ DRIVER'S LICENSE NO. \_\_\_\_\_ STATE \_\_\_\_\_

DATE OF ARREST \_\_\_\_\_ CITY AND COUNTY WHERE ARRESTED \_\_\_\_\_

IN WHAT COURT ARE YOU SCHEDULED TO APPEAR \_\_\_\_\_

COUNTY WHERE YOU DESIRE HEARING TO BE HELD \_\_\_\_\_

SIGNATURE OF REQUESTER \_\_\_\_\_

YOU DO NOT HAVE TO BE REPRESENTED BY AN ATTORNEY. HOWEVER, IF YOU ARE REPRESENTED BY AN ATTORNEY PLEASE LIST THE NAME AND ADDRESS OF THE ATTORNEY TO BE NOTIFIED: (INCOMPLETE ADDRESS CANNOT BE PROCESSED).

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/ZIP \_\_\_\_\_

IF YOU REQUEST AN ADMINISTRATIVE HEARING TO CONTEST THE SUSPENSION, REVOCATION OR DISQUALIFICATION, THE REQUEST WILL NOT DELAY YOUR SUSPENSION, REVOCATION OR DISQUALIFICATION FROM BEGINNING 30 DAYS FROM THE DATE OF ARREST UNLESS YOU RECEIVE A FAVORABLE DETERMINATION. A LETTER WILL BE SENT TO THE ABOVE ADDRESS NOTIFYING YOU OF THE STATUS OF YOUR HEARING.

YOU MAY ONLY BE CONSIDERED FOR A RESTRICTED DRIVING PERMIT IF:

- (1) THIS IS YOUR FIRST ALCOHOL RELATED OFFENSE WITHIN THE LAST FIVE YEARS AND YOUR BAC LEVEL IS BELOW .15%.
- (2) YOU DID NOT REFUSE TO SUBMIT TO THE TEST (S).
- (3) YOU ARE NOT A MULTIPLE TRAFFICE LAW OFFENDER.
- (4) YOU DO NOT PRESENT A THREAT TO THE GENERAL PUBLIC.

(A RESTRICTED PERMIT TO DRIVE A COMMERCIAL VEHICLE WILL NOT BE ISSUED.)

- I DESIRE AN ADMINISTRATIVE HEARING TO CONTEST THE SUSPENSION, REVOCATION OR DISQUALIFICATION OF MY DRIVING PRIVILEGE.
- I DESIRE AN ADMINISTRATIVE HEARING TO BE CONSIDERED FOR A RESTRICTED DRIVING PERMIT WHICH WOULD ALLOW ME TO DRIVE FOR EMPLOYMENT, EDUCATIONAL, MEDICAL OR ALCOHOL SAFETY EDUCATION AND TREATMENT COURSES.
- I DESIRE AN ADMINISTRATIVE HEARING TO BE CONSIDERED FOR A RESTRICTED NON-COMMERCIAL PRIVILEGE DURING THE DISQUALIFICATION OF MY COMMERCIAL PRIVILEGE.

## Administrative Hearing Information

The hearing shall be before the Office of Driver Services or its authorized agent, in the Office of the Revenue Division of the Department of Finance and Administration nearest the county wherein the alleged events occurred for which the person was arrested. The Office of Driver Services or its authorized agent and the arrested person may agree to the hearing being held in some other county. The Office of Driver Services or its authorized agent may schedule the hearing or any part thereof by telephone and conduct the hearing by telephone conference call. The hearing shall not be recorded. The scope of the hearing shall cover the issues of whether the officer had reasonable grounds to believe the person had been operating or was in actual physical control of a vehicle while intoxicated or while there was an alcohol concentration of eight-hundredths of one percent (0.08%) for DWI offenses, four hundredths of one percent for CDL offenses (0.04%), or two hundredths of one percent for Underage DUI offenses (0.02% through 0.07%), or more by weight of alcohol in the person's breath or blood or refused to submit to a chemical test of the blood, breath or urine for the purpose of determining the alcohol or controlled substance contents of the person's breath or blood and whether the person was placed under arrest. At the hearing, the burden of proof shall be on the state and the decision shall be based on a preponderance of the evidence.

If your driving privilege is suspended, disqualified or revoked for a second or subsequent alcohol related offense within the past five years, the registration of all motor vehicles owned or co-owned by you will be suspended for a time equal to the suspension of your driving privilege, or one year, whichever is longer. (AR Code Ann. §5-65-403). You have the right to an administrative hearing concerning the suspension of your vehicle registration within 20 days; the hearing request must be made within seven calendar days of notice being given. The scope of the hearing regarding the registration suspension will be limited to: (1) Determine whether you have had two or more offenses within the past five years and (2) Determine if any vehicles are registered in your name. A family member or co-owner may be granted a restricted registration if the person is completely dependent on the motor vehicle for necessities of life.

If the revocation, suspension, disqualification or denial is based upon a chemical test result indicating that the person was intoxicated or there was an alcohol concentration of eight-hundredths of one percent (0.08%) for DWI offenses, four hundredths of one percent for CDL offenses (0.04%), or two hundredths of one percent for Underage DUI offenses (0.02% through 0.07%) or more by weight of alcohol in the person's breath or blood (and a sworn report from a law enforcement officer) the scope of the hearing shall also cover the issues as to whether:

- 1) The person was advised that his privilege to drive would be revoked, suspended, disqualified or denied if the test result reflected an alcohol concentration of eight-hundredths of one percent (0.08%) for DWI offenses, four hundredths of one percent for CDL offenses (0.04%), or two hundredths of one percent for Underage DUI offenses (0.02% through 0.07%) or more or the presence of other intoxicating substances or combination of intoxicating substances;
- 2) The breath, blood or urine specimen was obtained from the person within the established and certified criteria of the Arkansas Department of Health;
- 3) The testing procedures used were in accordance with existing rules; and
- 4) The test result in fact reflects an alcohol concentration, presence of other intoxicating substances or a combination thereof.

If the revocation, suspension, disqualification or denial is based upon the refusal of the person to submit to a chemical test as provided in §5-65-202, §5-65-309 or § 27-23-115, reflected in a sworn report by a law enforcement officer, the scope of the hearing shall also include whether:

- 1) The person refused to submit to the test or tests; and
- 2) The person was informed that his privilege to drive would be revoked, suspended, disqualified or denied if the person refused to submit to the test or tests.

## Restricted Permit Information

**A restricted permit to drive a commercial vehicle will not be issued.**

You may only be considered for a restricted driving permit if: (1) This is your first alcohol related offense within the last five years and your BAC level was below .15%. (2) You did not refuse to submit to the test(s). (3) You are not a multiple traffic law offender. (4) You do not present a threat to the general public. If you are not eligible for a restricted driving permit, you may ask the hearing officer about the possibility of an Ignition Interlock restricted license.

## Reinstatement Information

If you are acquitted in a court of competent jurisdiction of the alcohol related offense(s) for which you were arrested or if you receive a favorable determination at a departmental hearing as described above, then your privilege will be reinstated if no other grounds for suspension exist.

Your driving privilege may also be considered for reinstatement upon the expiration of the suspension, revocation or disqualification period, the payment of a \$150.00 reinstatement fee (\$25.00 if Underage DUI) at any Revenue Office and the completion of a rehabilitation program. You must furnish the Driver Control Section with written proof of an Arkansas approved rehabilitation program. **ONLY THE ORIGINAL CERTIFICATE WILL BE ACCEPTED** by Driver Control for verification of completion of the rehabilitation program. Your driving privilege cannot be reinstated until the certificate is received by Driver Control.