

ERIE COUNTY MUNICIPAL COURT

150 WEST MASON ROAD
MILAN, OHIO 44846
PHONE 419-499-4689 FAX 419-499-330

Name _____ Court Case # _____
DOB _____ BMV Case # _____

12 POINT SUSPENSION APPEAL

PLAINTIFF:

**Bureau of Motor Vehicles
P.O. Box 16520
MVOIDIP
Columbus, Ohio 43266-0020**

DEFENDANT

Now comes the Plaintiff _____, and states that they received a notice from the Ohio bureau of Motor Vehicles that their drivers license will be suspended effective on _____ 20 ____ .

Plaintiff can show cause why the suspension should be modified.

Plaintiff requests to file this appeal for driving privileges for a period ending _____ 20 ____ .

Plaintiff states that their employment and or education would be greatly affected if this suspension is imposed.

Plaintiff agrees to pay the costs associated with this appeal.

Signature of Plaintiff

Dated _____ 20 ____

A court stamped copy of the foregoing petition was mailed to the Ohio Bureau of Motor Vehicles on _____ 20 ____ .