

STATE OF INDIANA )  
 ) SS  
COUNTY OF ALLEN )

IN THE ALLEN SUPERIOR COURT  
CAUSE NO.

\_\_\_\_\_) )  
(Print your name above) )  
Petitioner, )  
vs. )  
INDIANA BUREAU OF MOTOR )  
VEHICLES and KAREN RICHARDS, as )  
Prosecutor of Allen County, Indiana, )  
Respondents. )

**PETITION FOR WAIVER OF BMV REINSTATEMENT FEES**

Petitioner states that:

1. My name is \_\_\_\_\_.
2. My birthdate is \_\_\_\_\_.
3. The last four digits of my driver license number are \_\_\_\_\_.
4. I currently reside at \_\_\_\_\_  
\_\_\_\_\_, (Zip code) \_\_\_\_\_.
5. My telephone number is: \_\_\_\_\_.
6. Pursuant to I.C. 9-29-10-3, due to my financial hardship, I'm requesting an order from the Court waiving the payment of any BMV reinstatement fees due and owing.

\_\_\_\_\_  
Signature of Petitioner