## **APPLICATION FOR:**

Driving During Suspension – Probation with Restrictive
Conditions

Money order to County of Blair

Fee due with application - \$ 300

DDS OFFENSE $\Box 1^{st}$ $\Box 2^{nd}$ (Lifetime. This is not a 10 year look back offense)	Alcohol Related Non-alcohol
NAME:	PHONE: ()
ALIAS AND/OR MAIDEN NAME:	
DATE OF BIRTH:	SOCIAL SECURITY NUMBER:
COUNTY IN WHICH YOU LIVE: BLAIF	R OTHER:
ADDRESS:	<u> </u>
EMAIL ADDRESS:	
CASE NUMBER:	DATE OF OFFENSE:
ATTORNEY'S NAME:	PHONE #:
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1st Offense non alcohol 15 DAYS INCARCERA? 1st Offense alcohol related 30 DAYS INCARCERA? 2nd & Subsequent Offense(s) 60 DAYS INCARCERA?	
EMPLOYMENT / INCOME SOURCE:	
	om the Blair County Prison, you must contact the Work
	ng application are true and correct to the best of my d that false statements herein are made subject to the D Unsworn Falsification to Authorities
DEFENDANT'S SIGNATURE	DATE

Please return this application at the preliminary conference or mail to:

Blair Drug & Alcohol Partnerships, 3001 Fairway Drive, Suite D, Altoona, PA 16602 (in Fairway Centre beside Pennsylvania Department of Environmental Protection)