

**IN THE ADAMS SUPERIOR COURT  
26<sup>TH</sup> JUDICIAL CIRCUIT  
DECATUR, INDIANA**

**Instructions for Petitions and Proceedings to Waive BMV Driver's License  
Re-Instatement Fees Under Indiana Code 9-25-6-15.1**

If the Indiana Bureau of Motor Vehicles (BMV) has notified you that you must pay re-instatement fees in order to obtain a valid Indiana Driver's License then you may be eligible to seek a Court Order directing the BMV to waive part or all of those re-instatement fees.

To seek this Court Order directing the BMV to waive your re-instatement fees you must meet the following requirements:

1. You must be indigent.
2. You must be a resident of Adams County, Indiana.
3. You must owe re-instatement fees to the BMV in order to re-instate your driver's license.
4. You must have proof of future financial responsibility (contact your insurance agent to obtain a written insurance quote).

If you meet the above requirements, please complete the following forms: (fill in **all** blanks and sign all forms)

1. Appearance form
2. Verified Petition to Waive Re-Instatement Fees.
  - a. Attach the BMV Notice of Re-Instatement Fees to the Verified Petition.
  - b. Attach the Written Insurance Quote to the Verified Petition.
  - c. Attach the Indigency Affidavit.
  - d. Attach a copy of your Official Driving Record.
3. Notice of Hearing
  - a. For yourself
  - b. For the Prosecutor

File the completed and signed Verified Petition and attachments, along with the Summons with the Adams County Clerk's Office.

This action does not require a filing fee when filing the documents with the Clerk.

The Clerk will assign your paperwork a Cause Number (MC).

The Clerk will issue a copy of your paperwork to the Court for processing. If all of the above forms are completed and filed, then the Court will schedule a Court hearing in the Adams Superior Court and all parties (Petitioner and Prosecutor) will be notified of the hearing at which **you** must appear.

Following the hearing, the Court will issue an Order either granting your Verified Petition and waiving your re-instatement fees, in part or in full or denying your request.

Should you fail to fully complete your paperwork or fail to attend your hearing your Verified Petition will be summarily dismissed.

**IN THE ADAMS SUPERIOR COURT  
26<sup>TH</sup> JUDICIAL CIRCUIT  
DECATUR, INDIANA**

CAUSE NO.: 01D01-\_\_\_\_\_-MC-\_\_\_\_\_

\_\_\_\_\_  
Petitioner

-VS-

**JEREMY W. BROWN,**  
**ADAMS COUNTY PROSECUTING ATTORNEY**  
Respondent

**INDIGENCY AFFIDAVIT**

The Petitioner now states:

1. I wish to file this action and I believe that I have a case with merit.
2. I cannot pay any of the filing fees or other costs of this action because I do not have sufficient income or resources.
3. I cannot pay any of the re-instatement fees required by the BMV because I do not have sufficient income or resources.

4. I live with \_\_\_\_\_.

5. Our family's income is \_\_\_\_\_ per month. **(Total from below)**

**(Income received each month, before taxes)**

Wages (\$ _____ per hour x _____ hours per month)		_____
Unemployment Compensation		_____
AFDC / TANF Benefits		_____
SSI / SSD Benefits		_____
Child Support		_____
Money in the Bank/Investment Account(s)		_____
Other	+	_____
	Total =	_____

6. We have \$ \_\_\_\_\_ in the bank.

7. Our expenses total \_\_\_\_\_ per month: **(Total from below)**

**(Expenses spent each month)**

Housing (Rent, Contract, or Mortgage)		_____
Utilities (Gas, Electric, Water, Phone, etc.)		_____
Food		_____
Child Care		_____
Medical Bills		_____
Transportation		_____
Insurance (car, medical and/or property)		_____
Child Support		_____
Other: _____ (brief description)	+	_____
	Total =	_____

I request that this Court Order the BMV to waive all or part of the re-instatement fees assessed against me.

I affirm under the penalties of perjury that the foregoing representations are true.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

IN THE ADAMS SUPERIOR COURT  
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**PERSONAL APPEARANCE FORM**  
**SELF-REPRESENTED PETITIONER**

**Petitioner:** \_\_\_\_\_

**Case Number:** \_\_\_\_\_

**I am representing myself *Pro Se*.**

1. Full Name of Petitioner: \_\_\_\_\_

2. Self Represented Petitioner Information (as applicable for service):  
Address: (both physical and mailing – if different)

Street Address: \_\_\_\_\_

Post Office Box: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Telephone Number (including area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

The Petitioner shall always advise and update the Court of all changes in information provided to the Court.

IN THE ADAMS SUPERIOR COURT  
26<sup>TH</sup> JUDICIAL CIRCUIT  
DECATUR, INDIANA

CAUSE NO.: 01D01-\_\_\_\_-MC-\_\_\_\_\_

\_\_\_\_\_  
Petitioner

-VS-

JEREMY W. BROWN,  
ADAMS COUNTY PROSECUTING ATTORNEY

Respondent

**VERIFIED PETITION TO WAIVE RE-INSTATEMENT FEES**

Comes now the Petitioner, and for his/her Verified Petition to Waiver Re-Instatement Fees now states as follows:

I am indigent. (See attached Affidavit of Indigency)

I reside in Adams County, Indiana at the following address:

\_\_\_\_\_  
I owe fees to the Indiana Bureau of Motor Vehicles in the sum of \$ \_\_\_\_\_  
for reinstatement of my driver's license. (See attached BMV Notice)

I have proof of future financial responsibility. (See attached Insurance Documents)

For the following reasons, my personal character and the circumstances surrounding the suspension of my license justify this Petition:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby affirm under the pains and penalties for perjury that the foregoing statements are true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

**IN THE ADAMS SUPERIOR COURT  
26<sup>TH</sup> JUDICIAL CIRCUIT  
DECATUR, INDIANA**

\_\_\_\_\_  
Print Full Name                      Petitioner

**CAUSE NO.: 01D01-\_\_\_\_\_ -MC-\_\_\_\_\_**

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Indiana Driver's License Number

To Respondent:        **Adams County Prosecuting Attorney  
112 South Second Street – Room B  
Decatur, IN 46733-1618**

**NOTICE OF HEARING**

You are hereby notified that the Petitioner, \_\_\_\_\_, has filed their Waiver of BMV Reinstatement fees, a copy of which is attached hereto, in the Adams Superior Court under the above-captioned cause.

You are further hereby notified that the Court now sets \_\_\_\_\_ as the date and time for the hearing in this matter. The hearing will take place in the Adams Superior Court located at 122 South Third Street in Decatur Indiana 46733.

Be advised that if you fail to appear for said hearing, the Petitioner may be granted the relief that they are requesting in their petition.

Copies of this Notice of Hearing will be issued to the Petitioner, the Indiana Bureau of Motor Vehicles and the Adams County Prosecutor through electronic transmission.

Dated:

\_\_\_\_\_  
Samuel K. Conrad  
Judge, Adams Superior Court

IN THE ADAMS SUPERIOR COURT  
26<sup>TH</sup> JUDICIAL CIRCUIT  
DECATUR, INDIANA

\_\_\_\_\_  
Print Full Name

Petitioner

CAUSE NO.: 01D01-\_\_\_\_\_-MC-\_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Indiana Driver's License Number

To Petitioner:

\_\_\_\_\_  
**Petitioner's Name & Full Mailing Address**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NOTICE OF HEARING**

The Court finds that your documents and attachments are in order and you are hereby notified that the Court now sets your Petition for Waiver of BMV Reinstatement fees, for hearing on \_\_\_\_\_. The hearing will take place in the Adams Superior Court located at 122 South Third Street in Decatur Indiana 46733.

Be advised that if you fail to appear for said hearing, your Verified Petition for Waiver of BMV Re-instatement will be summarily dismissed

Copies of this Notice of Hearing will be issued to the Petitioner, the Indiana Bureau of Motor Vehicles and the Adams County Prosecutor through electronic transmission.

Dated:

\_\_\_\_\_  
Samuel K. Conrad  
Judge, Adams Superior Court