

DDS

GEORGIA DEPARTMENT
OF DRIVER SERVICES

State Court Judges
Spring Conference
Brasstown Valley
2018

Topics for Discussion:

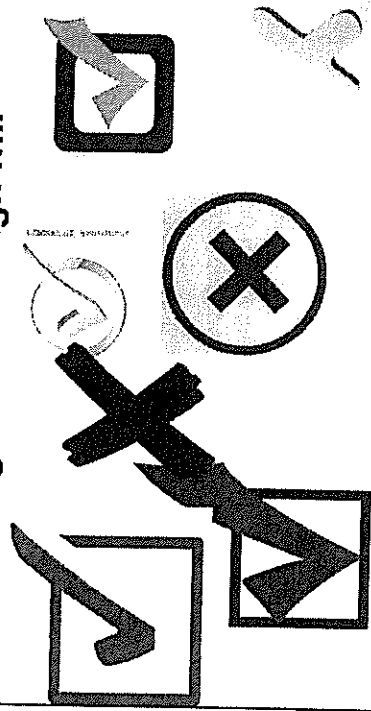
- DDS Form Review
- Do or Don't Do, Yes or No, True or False, Submit or Don't Submit, Sign or Don't Sign
- Resources at DDS




DDS Form Review



Do or Don't Do, Yes or No,
True or False, Submit or Don't
Submit, Sign or Don't Sign




 Georgia

#1

- Defendant was 19 years old, and was stopped for speeding. The law enforcement officer smelled the odor of marijuana while at the driver's window. The driver consented to a search of the vehicle, and the officer found a small bag of marijuana under the driver's seat. The driver was convicted of speeding and possession of marijuana less than one ounce.
 - Should the court submit the marijuana conviction to the DDS?

SUBMIT DON'T SUBMIT

Page 5


 Georgia

#2

- Defendant is over the age of 21, has a valid GA license, and no prior convictions for DUI or mandatory suspendable offenses. Defendant is convicted of DUI combined influences under 40-6-391(a)(4). Defendant's attorney requests the court issue the 1st DUI Affidavit.
 - The defendant is not eligible for a limited permit, and the court should not issue the 1st DUI Affidavit.

TRUE FALSE

Page 6

 Georgia


#3

- Defendant was 20 years old, and was stopped for speeding (90/50).
 - Can an under 21 driver avoid the suspension with a zero points order for going 24 or more over the speed limit?

YES NO MAYBE
 - Will the defendant be declared a Super Speeder and be required to pay the additional \$200 super speeder fee?

YES NO MAYBE

Page 7

 Georgia

#4

- Defendant was stopped for DUI. Defendant refused to provide the requested breath sample and was issued a DS-1205 for the refusal. Defendant obtained a one year interlock permit based upon the refusal. Defendant was convicted of the DUI.
 - Should the court seize the interlock permit and send to the DDS? Should the court serve the defendant with the notice of suspension (DS-1190)?

YES NO MAYBE

Page 8

#5



- Defendant with a Tennessee license was arrested for DUI. Defendant obtained a GA license before the scheduled court date. Defendant appeared in court and entered a plea of guilty to the DUI. Attorney for the defendant requests the court update the court software with the defendant's GA license info and GA address before transmitting the DUI conviction to the DDS.
 - Is it ok for the court to update the license info before transmitting the conviction to the DDS?

YES

NO

MAYBE

Page 11

#6



- Defendant is over the age of 21, has a valid GA license, and no prior convictions for DUI or mandatory suspendable offenses. Defendant is convicted of Hit and Run. Defendant's attorney requests the court to issue an Affidavit to allow issuance of a limited permit.
 - The defendant is not eligible for a limited permit.

TRUE

FALSE

- The court should not issue an Affidavit.

TRUE

FALSE

Page 12

#7



- Defendant convicted of running a red light in your court. The judge did not place the defendant on probation but allowed her one month to pay the fine. Defendant failed to pay the fine. It has now been two months since she was convicted of the offense.
 - The court should submit the failure to pay (FTP) record to the DDS to impose a license suspension.

TRUE

FALSE

Page 13

#8




- Defendant convicted of DUI in your court. A careful review of the driving record shows the following convictions with offense dates within 5 years of the offense date of the current DUI:
 - Driving on a suspended license,
 - No Insurance,
 - Driving on a suspended registration, and
 - Speeding.
- Should the court serve the defendant with notice of Habitual Violator (HV) declaration?

YES

NO

MAYBE

Page 14


 Georgia

#9

- Defendant convicted of DUI in your court. A careful review of the driving record shows the following convictions with offense dates within 5 years of the offense date of the current DUI:
 - Driving on a suspended registration,
 - No Insurance,
 - Driving on a suspended registration, and
 - Speeding.
- Should the court serve the defendant with notice of Habitual Violator (HV) declaration?

YES NO MAYBE

Page 13


 Georgia

#10

- Defendant convicted of DUI in your court. A careful review of the driving record shows the following convictions with offense dates within 5 years of the offense date of the current DUI:
 - Driving on a suspended license,
 - No Insurance,
 - Driving under the influence (DUI),
 - Speeding.
- Should the court serve the defendant with notice of Habitual Violator (HV) declaration?

YES NO MAYBE

Page 13


 Georgia

#11

- Defendant convicted of DUI in your court. A careful review of the driving record shows the following convictions with offense dates within 5 years of the offense date of the current DUI:
 - Driving on a suspended license,
 - No Insurance,
 - Driving under the influence (DUI),
 - Hit and Run.
- Should the court serve the defendant with notice of Habitual Violator (HV) declaration?

YES NO MAYBE

Page 13

 Georgia

#12

- Defendant was driving and was stopped for running a red light. Defendant was 19 yoa and was alone in the vehicle. Defendant had a cold open can of Bud Light in the console and was charged with, and convicted of, possession of alcohol by a minor.
 - Should the court submit the conviction for the UAPA to the DDS?

SUBMIT DON'T SUBMIT

Page 13

#13



- Defendant was stopped for DUI. Defendant refused to provide the requested breath sample and was issued a DS-1205 for the refusal. Defendant failed to request a timely ALS hearing and was suspended for one year for the refusal. Defendant was convicted of the DUI. The judge issues an Order instructing the DDS to remove the administrative suspension for the refusal.
 - Can the DDS legally comply with the judge's Order?

YES

NO

MAYBE

Page 13

#14



- Defendant was stopped for DUI. Defendant refused to provide the requested breath sample and was issued a DS-1205 for the refusal. Defendant failed to request a timely ALS hearing and was suspended for one year for the refusal. Defendant was convicted of DUI less safe. The judge signs the 1st DUI Alcohol Affidavit for a permit.
 - Can the DDS issue a limited permit to the defendant?

YES

NO

MAYBE

Page 14

#15



- 19 yoa defendant stopped for Speeding (54/30). Defendant wants to plead under a zero points order (40-5-57(c)(1)(C)) to avoid the assessment of 4 points, and the license suspension.
 - If the court accepts the plea under the zero points order, will the license be suspended?

YES

NO

MAYBE

- What if the defendant pleads nolo - will the license be suspended?

YES

NO

MAYBE

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#16



- 19 yoa defendant stopped for Reckless Driving. Defendant wants to plead under a zero points order (40-5-57(c)(1)(C)) to avoid the assessment of 4 points, and the license suspension.
 - If the court accepts the plea under the zero points order, will the license be suspended?

YES

NO

MAYBE


- What if the defendant pleads nolo - will the license be suspended?

YES

NO

MAYBE

Page 16


 Georgia

#17

- Defendant convicted of Fleeing/Attempting to Elude and issued a limited permit by the DDS. Defendant involved in an accident while driving on the limited permit and ticketed for Following too close in your jurisdiction. Defendant appears in court and pays the ticket. The conviction is reported to the DDS.
 - There will be no license or permit consequences to the defendant after the conviction is received by the DDS.

TRUE **FALSE**

Page 21


 Georgia

#18

- Defendant was stopped for DUI, refused to provide the requested breath sample, and was issued a DS-1205 for the refusal. Defendant timely requested a hearing but did not prevail at the OSAH hearing, and was suspended for one year for the refusal. At the criminal trial, the refusal was suppressed, but defendant was convicted of DUI less safe. The judge issued an Order instructing the DDS to remove the administrative suspension because the refusal was suppressed.
 - Can the DDS legally comply with the judge's Order?

YES **NO** **MAYBE**

Page 22


 Georgia

#19

- Defendant was convicted of a 2/5 DUI Alcohol and must complete the interlock requirement to reinstate the license suspension. This can be accomplished by:
 - Complete the interlock requirement (either 6, 8, or 12 months), or
 - Obtain an interlock waiver for "undue financial hardship" from the sentencing court, or
 - Serve a period of three (3) years of hard suspension.

TRUE **FALSE**

Page 21

 Georgia

#20

- Defendant is charged with Fleeing/Attempting to Elude. Attorney for defendant wants to plead under the First Offender Act.
 - Should the court submit the disposition of the case to the DDS?

SUBMIT **DON'T SUBMIT**

- Will a plea to this offense under the FOA avoid a license suspension?

YES **NO** **MAYBE**

#21

- Defendant convicted in your court of DUI in 2010. Defendant also had a conviction in another court for Hit and Run in 2006. Defendant has decided to apply for a CDL, but is currently disqualified for life based upon these two convictions. Defendant asks the court to reopen his DUI case and reduce the charge to Reckless driving. You agree to do so and your clerk submits the Court Correction form to the DDS, changing the conviction.
- The DDS will change the DUI conviction on the driving record to a Reckless driving conviction.

TRUE

FALSE

Page 11



#22

- Defendant was charged with Speeding in 2015 and entered a plea of nolo to avoid the points. Defendant was recently charged with Driving on a Suspended License and wants to plead nolo to avoid the license suspension.
- A nolo plea to this charge of DWLS will not avoid a license suspension since the defendant used his nolo plea back in 2015.

TRUE

FALSE

Page 11

#23

- Defendant was stopped and charged with the following:
 - Speeding,
 - No Insurance,
 - Driving with license suspended,
 - Driving with a suspended vehicle registration, and
 - Possession of drug related objects.
- The defendant could plead nolo to all charges and not suffer a license suspension.

YES

NO

MAYBE

Page 11



#24

- Defendant was convicted of Following too close and was assessed three points for the offense. Defendant's total point count is now 16 points. This is the first time that the defendant has been suspended for points.
- The defendant's license will be suspended for a period of six months.

TRUE

FALSE

Page 11



#25

- Defendant was convicted of DUI and Racing. The court issued the 1st DUI Alcohol Affidavit, and the DDS issued a DUI limited permit. The court transmitted both convictions to the DDS within 10 days and they were added to the driving record.
 - The defendant can drive on the DUI limited permit until both suspensions are reinstated.

TRUE

FALSE

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Resources at DDS

- Contact Us
- Check License Status
- Forms and Manuals
- dds.georgia.gov



Check License Status

- <https://online.dds.ga.gov/DLStatus>
- (404) 657-9300
- Valid only for licenses issued by the state of Georgia

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Forms and Manuals

- dds.georgia.gov
- Click on "Forms and Manuals"
- Commercial Driver's Manual, Driver's Manual, Motorcycle Operator Manual, Parent/Teen Driving Guide
- Certificate of Attendance (teen drivers)
- Request for Driver Evaluation
- CDL Vision Exemption
- Medical Report
- Authorization of Limited Permit – 665b
- License Applications
- MVR Request

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Resources at dds.georgia.gov

- Click on "Partners" then "Courts"
 - Monthly Traffic Convictions Reported by Court
 - Court Bulletin
 - GECPS reporting information and tutorial
 - Legislative updates
 - Traffic Court Reference Manual

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Questions???

Contact Information:

DDS Legal Services
P.O. Box 80447
Conyers, Georgia 30013
(678) 413-8765
dds.georgia.gov

5/11/2018



GEORGIA DEPARTMENT OF DRIVER SERVICES
P.O. BOX 80447
CONYERS, GEORGIA 30013

OFFICIAL NOTICE OF REVOCATION/SUSPENSION SERVICE BY COURT

READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING FORM

Name _____ D.O.B. _____

Address _____ License No. _____

City _____ State _____ Zip Code _____

YOU ARE OFFICIALLY NOTIFIED that as provided by Georgia Law the following offense(s) will result in the revocation/suspension of your driver's license upon conviction for the following offense(s):

The period of revocation/suspension will be determined by the Department of Driver Services for the term authorized by law. The Department shall notify you of the period of revocation/suspension at your address on record with the Department; or, if you do not have a driving record in Georgia, at the address provided by you on this form.

YOU ARE HEREBY ORDERED to surrender any learner's permits, operator's, chauffeur's, and/or veteran's license in your possession and particularly the below numbered license(s), to the clerk of this court to be forwarded to the Department of Driver Services, Licensing and Records, P.O. Box 80447, Conyers, Georgia 30013.

Signature of Licensee Date License Number

License picked up? Yes No License Surrender Affidavit (DDS-250A)? Yes No

Other _____

Serving Official's Signature Date Print Name and Title

Signature of Witness Date Print Name and Title

Agency Serving Order Telephone Number

Agency's Mailing Address City State Zip Code

HEARING INFORMATION AND INSTRUCTIONS ON REVERSE SIDE

INSTRUCTIONS FOR COMPLETING FRONT OF THIS FORM

- 1) Print or type all requested information.
- 2) Photocopy completed form:
 - i) Mail original to the Department of Driver Services
 - ii) Give copy to Licensee
- 3) Attached the following to this form:
 - i) Driver's License or
 - ii) License Surrender Affidavit (DDS-250A)
- 4) Verify address used on reverse side.
- 5) Circle the appropriate term for Revocation, Suspension or Cancelled.
- 6) If this form is photocopied or duplicated, the hearing information must be on the back of all forms or service will be invalid.
- 7) **THIS FORM SHOULD NOT BE USED FOR PERSONAL SERVICE ON HABITUAL VIOLATORS, USE DDS-1189/1030 INSTEAD.**

HEARING

Any person adversely affected by any decision or action of the Department and who is entitled to have that decision or action reviewed may file a request for a hearing with the Department within ten (10) days of the receipt of this order, in accordance with the provisions of Rule 375-3-3-.04 of the Rule and Regulations of the Department of Driver Services. This request should describe specifically the decision or action to which it relates, state the change in decision or action the requester desires and the basis upon which the requester considers himself to be entitled to have such decision or action changed. If the person desires a hearing, a request therefore should be specifically made and signed by the driver, attorney or person duly sworn to act in the driver's behalf.

The Department will respond to all requests for hearings with notice of the grant of the requested change, notice of refusal to make a requested change, or notice scheduling a hearing. Any notice of refusal to make a requested change will state the reason for refusal. If a hearing is granted it will be scheduled within a reasonable time after the request therefore is received by the Department.

The hearing shall be scheduled in such a manner as follow for adequate investigation of the controversy.

MAIL THE REQUEST FOR HEARING TO:

**GEORGIA DEPARTMENT OF DRIVER SERVICES
LICENSING AND RECORDS DIVISION
P.O. BOX 80447
CONYERS, GEORGIA 30013**



LOST LICENSE OR LICENSE SURRENDER AFFIDAVIT
Georgia Department of Driver Services
Records Management
P.O. Box 80447
Conyers, GA 30013

I, _____, having received actual notice on
(Please print name as shown on driver's license)

_____ that my driving privileges have been suspended, revoked, or cancelled
(Date)

hereby certify that I am unable to surrender my driver's license as required by Georgia law for the following reason(s):

- has been seized by a law enforcement officer
- has been lost or stolen
- has been previously surrendered to a court or the Georgia Department of Driver Services (DDS)
- other _____

I understand that it is illegal to knowingly make a false affidavit or statement. I understand that it is illegal to display or be in possession of a driver's license that has been suspended, revoked, or cancelled pursuant to law and that doing so may result in a further suspension of my driving privileges.

Signature of Driver _____ DOB _____

Driver License # _____ Issuing State _____

Serving Agency _____

County _____

Serving Official's Name _____

Serving Official's Signature _____

INSTRUCTIONS

- Print or type all requested information.
- This is a two-part form:
 - Department of Driver Services copy is to be mailed to address at top of form
 - Serving Agency copy should be retained for their records

Department of Driver Services Copy



DDS
 GEORGIA DEPARTMENT
 OF DRIVER SERVICES

GEORGIA DEPARTMENT OF DRIVER SERVICES

FIRST DUI ALCOHOL CONVICTION PERMIT REFERRAL

PLEASE PRINT OR TYPE

According to the records available to the Court at the time of this conviction for Driving Under the Influence, Alcohol (DUI) in violation of O.C.G.A. §40-6-391, the person named herein may be eligible for issuance of a limited driving permit pursuant to O.C.G.A. §40-5-64(a):

Name _____ D.O.B. _____
 Last First Middle
 Address _____ License No. _____
 City _____ State _____ Zip Code _____

_____ Date of Violation _____ Date of Conviction _____ Case/Citation # _____

License Surrendered to Court? Yes No

_____ Driver License # _____ State _____ Class _____ Expiration Date _____

Lost License Affidavit (DDS-250A)? Yes No

License Previously Surrendered? Yes No **SEE IMPORTANT INFORMATION BELOW**

COURT ISSUING PERMIT REFERRAL

ORI NUMBER

_____ Court Mailing Address _____ City _____ State _____ Zip Code _____

_____ Telephone # _____

Printed Name of Authorized Official _____

Court Seal

Signature of Authorized Official _____

Please note that the issuance of this Referral by the Court does not guarantee that a permit will be issued by the Department of Driver Services. Reasons why a customer might not be eligible for issuance of a limited permit include, but are not limited to, the imposition of an implied consent (refusal) suspension in conjunction with this DUI, Alcohol, other license withdrawals unrelated to this DUI, Alcohol case, and for prior convictions that make the customer ineligible for such a permit under O.C.G.A. §40-5-64. PERMIT IS NOT VALID FOR DUI, DRUGS CONVICTION.

In accordance with O.C.G.A. § 40-5-64, the Georgia Department Of Driver Services (the Department) is authorized to issue a 1- year Limited Driving Permit immediately following first conviction for violating O.C.G.A. §40-6-391 within five (5) years (based upon the incident dates) only if the driver has surrendered his or her driver's license to the court in which the conviction was imposed, to the Department, or if the Department has processed the citation or conviction.

If the driver swears or affirms to the court or the Department that his or her driver's license was surrendered prior to the date of conviction indicated on the front of this affidavit, and such surrender can be verified by the Department through an inquiry of the driver's record, then a limited permit may be issued, provided all other requirements outlined in O.C.G.A. § 40-5-64 have been met.

If the driver swears or affirms to the Department that his or her license was surrendered prior to the date he or she is seeking issuance of this Limited Driving Permit, but such surrender date cannot be verified through an inquiry of the driver's record, then it shall be the driver's responsibility to provide acceptable proof to the Department that his or her driver's license was surrendered prior to the date he or she is seeking issuance of this Limited Driving Permit. Acceptable proof may include the display of the driver's copy of the DDS 1205 Administrative License Suspension form or the DS 1190 Court Service of Suspension form, provided that one or both of the forms of the forms verifies a surrender date; a certified copy of the DDS 1205 Administrative License Suspension form, provided the certified copy of the DDS 1205 Administrative License Suspension form verifies a surrender date; or a sworn affidavit submitted to the Department indicating that the driver's license is lost, or for any other reason surrender to the Department is impossible. If the Department does not have sufficient evidence to believe that the date of surrender set forth in such affidavit is true, the date of receipt of such affidavit by the Department shall be controlling. Provided that a surrender date can be verified or established, and all other requirements of O.C.G.A. §40-5-64 have been met, a limited driving permit may be issued.

GEORGIA DEPARTMENT OF DRIVER SERVICES
ALS UNIT/ P.O. BOX 80447 / CONYERS, GEORGIA 30013

REPORT OF THE ARRESTING OFFICER: ADMINISTRATIVE LICENSE SUSPENSION AND IMPLIED CONSENT

TYPE OR PRINT CLEARLY (IN INK) ALL REQUESTED INFORMATION

INCIDENT DATA

INCIDENT DATE: MM/DD/YR	INCIDENT TIME: AM PM	COUNTY OF OCCURRENCE:	DUI CITATION NUMBER	COMMERCIAL VEHICLE: <input type="checkbox"/> YES <input type="checkbox"/> NO	HAZARDOUS MATERIALS PRESENT: <input type="checkbox"/> YES <input type="checkbox"/> NO
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DRIVER DATA

NAME: LAST FIRST MIDDLE			DATE OF BIRTH: MM/DD/YR		
CURRENT ADDRESS (STREET, CITY, STATE, ZIP CODE):					
DRIVERS LICENSE NUMBER:	STATE OF ISSUE:	LICENSE CLASS:	LICENSE RESTRICTIONS:	HEIGHT:	WEIGHT:
			SEX: MALE _____ FEMALE _____		

ARRESTING OFFICER DATA AND TEST DATA

ARRESTING OFFICER'S NAME: LAST FIRST MIDDLE			A/O TELEPHONE NO:	A/O'S PRECINCT, ZONE, OR POST ASSIGNMENT:
NAME OF LAW ENFORCEMENT AGENCY REPRESENTED BY ARRESTING OFFICER:				BADGE NUMBER:
LAW ENFORCEMENT AGENCY MAILING ADDRESS (STREET, CITY, AND ZIP CODE):				AGENCY'S ORI #:
TEST RESULTS: GRAMS	INSTRUMENT SERIAL NUMBER:	OPERATOR NAME:		OPERATOR PERMIT NO:

This arresting officer states that at the date and time noted above, having reasonable grounds to believe that the driver had been driving or in actual physical control of a moving vehicle while under the influence of alcohol or a controlled substance, I lawfully arrested the driver for violating O.C.G.A. 40-6-391; or the driver was involved in a motor vehicle accident or collision that resulted in serious injury or fatality; and after I informed the driver of his/her implied consent rights and the consequence of submitting or refusing to submit to such test the driver was asked to submit to state administered chemical testing as required by law and:

(MARK ONE ONLY)

- _____ The driver refused to submit to the designated state administered chemical testing; or
- _____ Chemical test results indicated an alcohol concentration of 0.08 grams or more; or
- _____ The driver was under the age of 21 and the chemical tests results indicated an alcohol concentration of 0.02 grams or more; or
- _____ The driver was operating a moving commercial motor vehicle and the chemical tests results indicated an alcohol concentration of .04 grams or more.

Arresting Officer's Signature

Report Date

SERVICE OF REPORT AND NOTICE OF LICENSE SUSPENSION

You are hereby personally served with notice that your driver's license and/ or your privilege to operate a motor vehicle in the State of Georgia will be suspended for a period to be determined by the Department of Driver Services due to your blood alcohol test results or refusal to submit to testing. If you refused chemical testing, the period of suspension is one (1) year. The suspension of your driver's license/driving privilege will begin on the 46th day following the serve date listed above. If you wish to appeal the suspension of your driver's license/driving privilege, INSTRUCTIONS ARE ON THE BACK OF THE DRIVER'S COPY OF THIS FORM.

Signature of Arresting Officer: _____ Serve Date: _____


Signature of Driver: _____ Serve Date: _____

TEMPORARY DRIVING PERMIT

Georgia law requires the Arresting Officer to seize your driver's license if you have been arrested for allegedly driving under the influence in violation of O.C.G.A. 40-6-391. The Driver's copy of this form will serve as a valid temporary driving permit for a period of forty-five (45) days from the serve date above if signed below. A temporary driving permit will not be issued to you if your driver's license or privilege is suspended, cancelled or revoked or driver is unlicensed.

NOTE TO OFFICER: The reason for non-issuance of this permit must be stated on this form and the driver must receive a copy of this "Notice" to meet the requirements as stated in O.C.G.A. 40-5-67.1. THIS TEMPORARY DRIVING PERMIT MUST BE ISSUED IF THE DRIVER'S LICENSE WAS VALID AT THE TIME OF ARREST.

- Yes No Is the driver eligible for a temporary driving permit? If No, state the reason _____
- Yes No License surrendered? If No, state the reason _____
- Yes No Is the surrendered license attached in the upper left corner of the DDS copy of this report?
- Yes No Is the surrendered license a Habitual Violator Probationary license?

SIGN TO VALIDATE TEMPORARY DRIVING PERMIT  Signature of Officer: _____

PERSONALLY GIVE YELLOW COPY TO DRIVER

IGNITION INTERLOCK DEVICE LIMITED PERMIT
CUSTOMER INFORMATION SHEET
Effective July 1, 2017

The Department of Driver Services (DDS) is unable to provide you with any legal advice or advise you how to proceed after your recent DUI arrest. The information sheet (located on the back) will allow you to determine what choices are available to you in making an informed decision on how to proceed.

You may wish to consult an attorney before making any decision. However, if you fail to choose an option within 30 calendar days of your serve date (located on the front of the DS-1205 form), your license will go into suspension on the forty-sixth (46th) day after your serve date (located on the front of the DDS-1205 form).

These three (3) factors must be taken into consideration when making your decision on how to proceed. There are four (4) options that you may have depending on your age, license status, and driving record.

Available options:


- Request an appeal,
- Request an ignition interlock device limited permit
- ~~Do nothing.~~
- A person who consented to the State-Administered test for DUI you may be eligible for the non-interlock permit.

You may only choose one (1) of these options. For example, you cannot request an appeal and obtain the ignition interlock device limited permit.

The DDS is unable to issue the ignition interlock device limited permit until:

- The DDS-1205 has been received by the Department, **and**
- The ignition interlock device has been installed in the vehicle

The DDS is not financially responsible to customers who install the Ignition Interlock Device and may not be eligible for the ignition interlock device limited permit.

Please turn over 

FACTORS	OPTIONS		
	Appeal	IID Limited Permit	Do Nothing
Your Age:			
21 years or older (or will be 21 within 30 days of the serve date on your notice)	√	√	√
Under 21 (and will not be 21 within 30 days of the serve date on your notice)	√		√
Your Licence Status:			
Valid Georgia driver's license	√	√	√
Expired Georgia driver's license, currently a Georgia resident (eligible to renew)	√	√	√
Expired Georgia driver's license, currently a Georgia resident (unable to renew)	√		√
Currently licensed in another state	√		√
Not licensed	√		√
Your Driving Record:			
Never been arrested for, or charged with, DUI	√	√	√
No active suspensions, cancellations, denials or revocations on Georgia driver's license	√	√	√
**Have not been convicted of DUI within the past five (5) years	√	√	√
**Have been convicted of DUI within the past five (5) years	√		√

Appeal - The appeal option is available to any driver arrested for DUI and issued the DS-1205 form by the arresting officer.

ID Limited Permit - The option to request an ignition interlock device limited permit (IIDLP) may be available to you during the period of suspension of your driver's license or privilege.

Do Nothing - If you choose to do nothing, your driver's license or privilege to drive will go into suspension on the forty-sixth (46th) day after your serve date.

Note: A person who consented to the State-Administered Test may be eligible for the non-interlock permit.

The DDS is unable to issue the ignition interlock device limited permit until:

- The DDS-1205 has been received by the Department, **and**
- The ignition interlock device has been installed in the vehicle

****** Five (5) years as calculated from dates of incidents/arrests.

ATTACH
DRIVER LICENSE
HERE

GEORGIA DEPARTMENT OF DRIVER SERVICES
P.O. BOX 80447 / CONYERS, GEORGIA 30013

REPORT OF THE ARRESTING OFFICER: ADMINISTRATIVE LICENSE SUSPENSION AND IMPLIED CONSENT
SUPPLEMENTAL REPORT FOR USE WHERE STATE ADMINISTERED CHEMICAL TEST OR TESTS RESULTS WERE PENDING

TYPE OR PRINT CLEARLY (IN INK) ALL REQUESTED INFORMATION

INCIDENT DATA

INCIDENT DATE: MM/DD/YR	INCIDENT TIME: AM PM	COUNTY OF OCCURRENCE:	DUI CITATION NUMBER:	COMMERCIAL VEHICLE: <input type="checkbox"/> YES <input type="checkbox"/> NO	HAZARDOUS MATERIALS PRESENT: <input type="checkbox"/> YES <input type="checkbox"/> NO
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DRIVER DATA

NAME: LAST	FIRST	MIDDLE	DATE OF BIRTH: MM/DD/YR			
CURRENT ADDRESS (STREET, CITY, STATE, ZIP CODE):						
DRIVERS LICENSE NUMBER:	STATE OF ISSUE:	LICENSE CLASS:	LICENSE RESTRICTIONS:	HEIGHT:	WEIGHT:	SEX: MALE _____ FEMALE _____

ARRESTING OFFICER DATA AND TEST DATA

ARRESTING OFFICER'S NAME: LAST	FIRST	MIDDLE	A/O TELEPHONE NO:	A/O'S PRECINCT, ZONE, OR POST ASSIGNMENT:
NAME OF LAW ENFORCEMENT AGENCY REPRESENTED BY ARRESTING OFFICER:				BADGE NUMBER:
LAW ENFORCEMENT AGENCY MAILING ADDRESS (STREET, CITY, AND ZIP CODE):				AGENCY'S ORI #:
TEST RESULTS: GRAMS	INSTRUMENT SERIAL NUMBER:	OPERATOR NAME:	OPERATOR PERMIT NO:	

This arresting officer states that at the date and time noted above, having reasonable grounds to believe that the driver had been driving or in actual physical control of a moving vehicle while under the influence of alcohol or a controlled substance, I lawfully arrested the driver for violating O.C.G.A. 40-6-391; or the driver was involved in a motor vehicle accident or collision that resulted in serious injury or fatality;

The arresting officer further confirms that the driver was requested to submit to state administered chemical testing as required by law and:

- Chemical test results indicated an alcohol concentration of 0.08 grams or more; or
- The driver was under the age of 21 and the chemical tests results indicated an alcohol concentration of 0.02 grams or more; or
- The driver was operating a moving commercial motor vehicle and the chemical tests results indicated an alcohol concentration of .04 grams or more.

Arresting Officer's Signature

Report Date

Department of Driver Services Copy

ARRESTING OFFICER'S HEARING GUIDELINES

Attendance

You will be notified by mail as to the hearing date, time and location by the Office of State Administrative Hearings. Your appearance at the Hearing is essential to the finding of the facts pertinent to this incident. It should be noted that your failure to appear may require the Adm. Law Judge to rule for the defendant and withdraw the ALS or Implied Consent suspension. Any request to reschedule must be made in accordance with the rescheduling procedures of the Office of State Administrative Hearings. A copy of these procedures may be obtained by calling 404-657-2800.

Scope of the Hearing

1. If the Arresting Officer has reasonable grounds to believe that the person was driving or in actual physical control of a moving motor vehicle while under the influence of alcohol or a controlled substance and was lawfully placed under arrest for violating code Section 40-6-391; or,
2. The person was involved in a motor vehicle accident or collision resulting in serious injury or fatality; and
3. Whether at the time of the request for the test or tests the officer informed the person of the person's implied consent rights and the consequence of submitting or refusing to submit to such test; and
4. Whether the person refused the test; or
5. Whether a test or tests were administered and the results indicated an alcohol concentration (A.C.) of 0.08 grams or more or, for a person under the age of 21, an A.C. of 0.02 grams or more; for a person operating or having actual physical control of a moving commercial vehicle, an A.C. of 0.04 grams or more; and
6. Whether the test or tests were properly administered by an individual possessing a valid permit issued by the Division of Forensic Sciences of the Georgia Bureau of Investigation on an instrument approved by the Division of Forensic Sciences or a test conducted by the Division of Forensic Sciences. A copy of the Crime Lab report shall satisfy this requirement.

Subpoenaed Documents

It should be understood by the arresting office that the following documents are hereby subpoenaed by the State and must be provided by the arresting officer to the Adm. Law Judge at the time of scheduled hearing:

1. A copy of the operator's permit showing that the operator has been trained on the particular type of instrument used if the arresting officer was the operator. A certified copy of the operator's permit is required if the arresting officer was not the operator.
2. One of the original copies of the test results; or
3. If the test is performed by the Division of Forensic Sciences, a copy of the Crime Lab Report.

SPECIAL NOTE: *You must provide these documents to the Administrative Law Judge.*



DDS
 GEORGIA DEPARTMENT
 OF DRIVER SERVICES

GEORGIA DEPARTMENT OF DRIVER SERVICES
Records Management
 P.O. Box 80447
 Conyers, Georgia 30013

OFFICIAL NOTICE OF HABITUAL VIOLATOR REVOCATION
SERVICE BY COURT OR LAW ENFORCEMENT

READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING FORM

Name _____ D.O.B. _____
 Address _____ License No. _____
 City _____ State _____ Zip Code _____

YOU ARE OFFICIALLY NOTIFIED that as of _____ (enter date declared) you have been declared an Habitual Violator of the laws relating to motor vehicles and traffic pursuant to the Driver's Licensing Act (O.C.G.A. §40-5-58, as amended) and that henceforth it shall be unlawful for you to operate a motor vehicle in the State of Georgia.

Your license and privilege to operate a motor vehicle in this State is revoked for a minimum of five (5) years from _____ (date license surrendered) and will remain revoked until the requirements of O.C.G.A. §40-5-62 are complied with. If you should be convicted of operating a motor vehicle while your license is under revocation as provided herein, you may be subject to confinement in the penitentiary for not less than one (1) nor more than five (5) years.

YOU ARE HEREBY ORDERED to surrender any and all licenses and/or permits in your possession, and particularly the above numbered license(s), to the Department of Driver Services, or show cause why you cannot. If license has been lost, a sworn affidavit (Lost License or License Surrender Affidavit, DDS-250A) is required.

I HAVE PERSONALLY RECEIVED SERVICE OF HABITUAL VIOLATOR REVOCATION NOTICE AND ORDER:

Date: _____

 Signature of Licensee

License picked up? Yes No Lost License or License Surrender Affidavit (DDS-250A)? Yes No

If no, reason license was not picked up: _____

 Serving Official's Signature Print Name and Title

 Signature of Witness (if available) Print Name and Title

 Serving Agency Telephone Number

 Agency's Mailing Address City State Zip Code

HEARING INSTRUCTIONS ON REVERSE SIDE

Department of Driver Services Copy

Instructions to Court or Law Enforcement for completing the front of this form

1. Print or type all requested information.
2. This is a three-part form:
 - a. Department of Driver Services copy
 - b. Driver's copy
 - c. Serving Agency Copy
3. Attach the following to the Department of Driver Services copy:
 - a. Driver License, or
 - b. Lost License or License Surrender Affidavit (DDS-250A)
4. Mail all items within three (3) days to the Department of Driver Services at the address at the top of the form.
5. Conviction date is to show as date of declaration provided license is picked up by court, or license surrender affidavit is completed and attached, or license is presently being held by the Department of Driver Services.
6. Fill in the blanks with the requested information.
7. Verify Address used on reverse side.
8. If this form is photocopied or duplicated, the hearing information must be on the back of all forms or service will be invalid.

HEARING INSTRUCTIONS

Any person adversely affected by any decision or action of the Department and who is entitled to have that decision or action reviewed may file a request for a hearing with the Department within ten (10) days of the receipt of this notice and order in accordance with the provisions of Rule 375-3-3-.04 of the Rules and Regulations of the Department of Driver Services. This request should describe specifically the decision or action which the requestor desires and the basis upon which the requestor considers himself to be entitled to have such decision or action changed. If the person desires a hearing, a request therefore should be specifically made. The Department will respond to all requests for hearing with notice of the grant of the requested change, notice of refusal to make a requested change, or a notice scheduling a hearing. Any notice of refusal to make a requested change will state the reason for refusal. If a hearing is granted, it will be scheduled within a reasonable time after the request is received by the Department. The hearing shall be scheduled in such a manner as to allow for adequate investigation of the controversy.

MAIL THE HEARING REQUEST TO:

GEORGIA DEPARTMENT OF DRIVER SERVICES
RECORDS MANAGEMENT
P.O. BOX 80447
CONYERS, GA 30013

Serving Agency Copy



GEORGIA DEPARTMENT OF DRIVER SERVICES
Records Management
 P.O. Box 80447
 Conyers, Georgia 30013

OFFICIAL NOTICE OF REVOCATION/SUSPENSION SERVICE BY LAW ENFORCEMENT

This form must not be used for personal service on Habitual Violators, please use the DDS-1189/1030

READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING FORM

YOU ARE OFFICIALLY NOTIFIED that as of _____ (enter date declared) your driver's license and privilege to operate a motor vehicle in the State of Georgia has been **SUSPENDED/REVOKED/CANCELLED** as provided for by law for the reason(s) listed below:

Henceforth, it shall be unlawful for you to operate a motor vehicle in the State of Georgia. Under Georgia law, it is a misdemeanor for any person to fail or refuse to surrender to the Department of Driver Service, upon lawful demand, any driver's license or permit that has been **SUSPENDED/REVOKED/CANCELLED**.

YOU ARE HEREBY ORDERED to surrender any and all licenses and/or permits in your possession, and particularly the above numbered license(s), to the Department of Driver Services, or show cause why you cannot. If license has been lost, a sworn affidavit (Lost License or License Surrender Affidavit, DDS-250A) is required.

Name _____ D.O.B. _____
 Address _____ License No. _____
 City _____ State _____ Zip Code _____

I HAVE PERSONALLY RECEIVED SERVICE OF NOTICE OF THE Suspension Revocation Cancellation OF MY DRIVER'S LICENSE:

_____ Date _____ Signature of Licensee _____

License picked up? Yes No Lost License or License Surrender Affidavit (DDS-250A)? Yes No

If no, reason license was not picked up: _____

 Serving Official's Signature _____ Print Name and Title _____

 Serving Agency _____ Telephone Number _____

 Agency's Mailing Address _____ City _____ State _____ Zip Code _____

HEARING INSTRUCTIONS ON REVERSE SIDE

Department of Driver Services Copy

Instructions to Law Enforcement for completing the front of this form

1. Print or type all requested information.
2. This is a three-part form:
 - a. Department of Driver Services copy
 - b. Driver's copy
 - c. Serving Agency Copy
3. Attach the following to the Department of Driver Services copy:
 - a. Driver License, or
 - b. Lost License or License Surrender Affidavit (DDS-250A)
4. Mail all items within three (3) days to the Department of Driver Services at the address at the top of the form.
5. Conviction date is to show as date of declaration provided license is picked up by court, or license surrender affidavit is completed and attached, or license is presently being held by the Department of Driver Services.
6. Fill in the blanks with the requested information.
7. Verify Address used on reverse side.
8. If this form is photocopied or duplicated, the hearing information must be on the back of all forms or service will be invalid.
9. This form **must not** be used for personal service on Habitual Violators, please use the DDS-1189/1030.

HEARING INSTRUCTIONS

Any person adversely affected by any decision or action of the Department and who is entitled to have that decision or action reviewed may file a request for a hearing with the Department within ten (10) days of the receipt of this order in accordance with the provisions of Rule 375-3-3-.04 of the Rules and Regulations of the Department of Driver Services. This request should describe specifically the decision or action which the requestor desires and the basis upon which the requestor considers himself to be entitled to have such decision or action changed. If the person desires a hearing, a request therefore should be specifically made. The Department will respond to all requests for hearing with notice of the grant of the requested change, notice of refusal to make a requested change, or a notice scheduling a hearing. Any notice of refusal to make a requested change will state the reason for refusal. If a hearing is granted, it will be scheduled within a reasonable time after the request is received by the Department. The hearing shall be scheduled in such a manner as to allow for adequate investigation of the controversy.

MAIL THE HEARING REQUEST TO:

GEORGIA DEPARTMENT OF DRIVER SERVICES
RECORDS MANAGEMENT
P.O. BOX 80447
CONYERS, GA 30013

Serving Agency Copy



Georgia Department of Driver Services
2206 East View Parkway, P.O. Box 80447, Conyers, Georgia 30013
Phone: (678)413-8400

**AUTHORIZATION FOR ISSUANCE
OF LP: LIMITED DRIVING PERMIT**

This form is to be used when a Court wishes to authorize issuance of a limited driving permit for a driver's license suspension imposed pursuant to O.C.G.A §40-5-57.1 for a speeding ticket in which the defendant is at least 18 years old on the date he/she applies for such permit, and his/her speed on the speeding conviction must be 24-33 miles per hour above the posted speed.

Defendant's Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Date of Birth: _____ Age: _____

Today's Date: _____

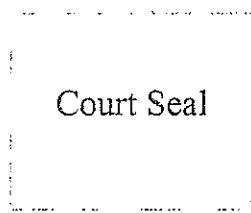
License Number: _____

Offense: **Speeding** Actual Speed: _____ Posted Speed: _____

Incident Date: _____ Case Number: _____

Disposition Date: _____ Citation Number: _____

Name of Court: _____



Judge's Signature

Court Seal

Print Name: _____

Phone Number: _____

This form should be given to the Defendant. He/she should take the form to a DDS Customer Service Center. Locations, hours and other information can be found at www.dds.ga.gov or 678-413-8400.



HANDS FREE GEORGIA LAW



Code Sections 40-6-241.1 and 40-6-241.2 are GONE, effective July 1, 2018 (upon Gov. Signature)

Any distraction driving violation needs to be written under 40-6-241.

Definitions:

- “Stand-alone electronic device” – 40-6-241 (a)(1)
 - What it is: - a device that stores audio or video data files to be retrieved on demand by a user. (Ex. – iPod.)
- “Wireless Telecommunications Device” - 40-6-241 (a) (3)
 - What it is:
 - Cell phones
 - Portable telephones or text-messaging devices
 - Personal digital assistant
 - Stand-alone computer
 - GPS receiver
 - Any similar portable wireless device used to send/receive communications or data
 - What it is NOT:
 - Radio
 - CB Radio OR CB Radio hybrid
 - Commercial two-way radio (or functional equivalent)
 - Subscription based emergency communications device
 - Proscribed medical device
 - Amateur or ham radio device
 - *In-vehicle* security, navigation, or remote diagnostics system.

What is prohibited?

- School Bus Operations (40-6-165):
 - A school bus driver may not use a wireless telecommunications device or two-way radio while loading or unloading passengers. (40-6-165 (d))
 - A school bus driver may not use a wireless telecommunications device while the bus is in motion, unless it is used in a manner similar to a two-way radio to allow communication with school or public safety officials. (40-6-165 (e))
- Motor Vehicle Operations (40-6-241):
 - A driver may not **physically hold or support** a wireless telecommunications device or stand-alone computer with any part of their body. (40-6-241 (c)(1))
 - Exceptions – Earpiece, headphone, smart watch
 - May not **Write, send, or read any text-based communication** (40-6-241 (c)(2))
 - Exceptions – Voice based communication automatically converted to written message
 - Navigation / GPS
 - May not **watch a video** (40-6-241 (c)(3))
 - Exception – Navigation
 - May not **record a video** (40-6-241 (c)(4))
 - Exception – Continuous recording / broadcasting (dash cams)

- For commercial motor vehicle operators **ONLY**: (40-6-241 (d))
 - May not use more than a single button to initiate a voice conversation
 - May not reach for a wireless telecommunications device in such a manner that they are:
 - No longer in a seated driving position
 - Or properly restrained by a seat belt
 - (Note – CMV provisions remain unchanged from previous law (former 4-6-241.2 (b)(2)) – avoids conflict with FMCSA regulations)
- Exceptions for everybody (40-6-241 (g)):
 - Reporting a traffic accident, medical emergency, fire, crime, or hazardous road condition;
 - Employee / contractor of utility service provider **acting within the scope of their employment while responding to a utility emergency**
 - By a first responder (police, fire, EMS) during the performance of their official duties;
 - When in a lawfully parked vehicle.

What are the Penalties?

- First offense within a 24 months period (measured from date of last conviction):
 - 1 point (40-5-57(c)(1)(A)(xv))
 - Fine of not more than \$50, with no additional costs / penalties, etc. (40-6-241 (f)(1)(A))
 - Driver in court for a **first violation** of 40-6-241 (c)(1) (supporting / holding device) who produces **in court** a device or proof of purchase of a device that would allow them to comply in the future shall not be guilty. (40-6-241 (f)(2))
 - Driver must affirm they have not previously used this before (one time only, but no statewide verification.)
 - Court shall have to determine what constitutes proof of a device.
 - Second offense within a 24 month period (measured from date of last conviction):
 - 2 points (40-5-57 (c)(1)(A)(xvi))
 - Fine of not more than \$100, with no additional costs / penalties, etc. (40-6-241 (f)(1)(B))
 - Third or subsequent violation within 24 month period (measured from date of last conviction)
 - 3 points (40-5-57(c)(1)(A)(xvii))
 - Fine of not more than \$150 (40-6-241 (f)(1)(C))

Possible myths about HB 673: (Things that were considered / in earlier versions of bill that were **NOT** in the final bill that passed.)

- Effective date – There is no effective date in the text of the bill, therefore, it becomes effective on 7/1 should it be signed. (OCGA 1-3-4 (a)(1))
- Predicate offense – Distracted driving is **not** a predicate offense for 1st Degree Vehicular Homicide.
- Primary offense – there is no requirement that an officer observe another violation or write any other citation to enforce this code section.
- Record of dismissals – DDS will **not** receive notice of citations that are nolle prosequi'd.

SPECIAL THANKS TO THE PROSECUTING ATTORNEY'S COUNCIL OF GEORGIA FOR THIS BREAKDOWN!



CHARLES A. SPAHOS
Executive Director

DANNY PORTER
Chair
District Attorney
Gwinnett Judicial Circuit

STEPHANIE WOODARD
Vice Chair
Solicitor-General
Hall County

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Rome Judicial Circuit

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Middle Judicial Circuit

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Solicitor-General
Henry County

BERT POSTON
District Attorney
Conasauga Judicial Circuit

ASHLEY WRIGHT
District Attorney
Augusta Judicial Circuit

A MEMO:

ALS SUSPENSIONS UNDER GEORGIA LAW

The Department of Driver Services has been receiving notification of suspensions for DUI citations for violations of O.C.G.A. 40-6-392. There are no DUI charges that can be brought pursuant to O.C.G.A. 40-6-392. Courts cannot sentence for a violation of O.C.G.A. 40-6-392 and the Department of Driver Services cannot suspend a driver's license based on a citation submitted under Code Section 392. All DUI charges MUST fit within O.C.G.A. 40-6-391(a)(1)-(a)(6), (i), (k) or (l) and none of those subsections authorize a charge for "DUI-Refusal." Depending on the suspected substance, when a defendant refuses to submit to state-administered chemical testing, he or she must be charged with driving while "less safe" pursuant to the applicable portion of 40-6-391.

If a suspected impaired driver refuses to take the state administered test after the officer has placed them under arrest for DUI and reads the appropriate implied consent warning, the officer can then issue a form DDS-1205. However, this will not result in an additional DUI charge of DUI Refusal.

If the defendant requests an ALS Hearing as instructed on form DDS-1205, the officer's opportunity to withdraw the 1205 expires once the Administrative Law Judge issues the final decision. If the defendant does not request an ALS Hearing, the officer's opportunity to withdraw the 1205 expires ten (10) days from the date of arrest. In either instance, once the ALS suspension for refusing to take the state administered test is final, neither the officer nor the court has the authority to dismiss the suspension because the implied consent suspension is an administrative function of the Department of Driver Services separate from the criminal charge.

The DDS recently received an inquiry from a judge that arose from the prosecutor’s assertion that “nearly always” offers of “defective equipment- not reported” was being made to CDL holders to avoid the commercial driving disqualification. The judge was concerned that accepting such pleas would be considered “masking.” We contacted the FMCSA and asked for comment on the question presented by the judge. Below is the response back from the FMCSA in it’s entirety. We are passing this along as we believe that it contains valuable and concise information that would be helpful to those on this email distribution. Consent was given by FMCSA for DDS to disseminate this info. Please feel free to forward as you deem appropriate.

<<<<>>>>>>>>>>

In passing 49 U.S.C. § 31311(a)(19). Congress intended to prohibit "both conviction masking and deferral programs by requiring every State to keep a complete driving record of all violations of traffic control laws (including CMV and non-CMV violations) by any individual to whom it has issued a CDL, and to make each such complete driving record available to all authorized persons and governmental entities having access to such record. This provision provides that a State may not allow information regarding such violations to be masked or withheld in any way from the record of a CDL holder." 145 Conf. Rec. H. 12870-12874 (1999). This is the origin of the Prohibition on Masking regulation found at 49 CFR 384.226.

- - - *Congress has demonstrated that a national, consistent CDL program is paramount by requiring States to follow or adopt the FMCSRs; including 49 C.F.R §§ 383.5 and 384.226, as a condition of both receiving Title 23 Federal highway funding and maintaining their certification to issue CDLs. The regulations apply only to CDL holders, not licensed drivers in general. These provisions are intended to ensure that States prosecute violations committed by CDL holders and document convictions on a driver’s record in the Commercial Driver’s License Information System (CDLIS). Federal law further requires that States disqualify commercial drivers upon a first or second conviction for certain major traffic offenses, such as driving under the influence (see 49 C.F.R. § 383.51). In the case of serious traffic offenses, such as speeding 15 or more miles over the speed limit, a disqualification is required for a second or subsequent offense within three years.*

Of significant concern in cases such as the scenario presented by the judge is the difficulty in determining how many times a CDL holder might get the benefit of this type of plea in different jurisdictions. In these cases, there is essentially no way for the prosecutor in the subsequent jurisdiction, particularly if it is out of county or out of state, to determine that this was a reduction from a serious or major offense. Even if they could, there is not much the subsequent prosecutor can do about it. Ultimately, the driver is never disqualified, even though he may have been charged with these offenses numerous times. This goes directly to the heart of the prohibition on masking.

This is also a question of ethical conduct. Is there probable cause to support the charge of defective equipment? Are there facts sufficient to support a plea or finding of guilt on this new charge? If the answer is “no,” both the prosecutor and defense attorney are potentially opening themselves up to sanction by their state’s attorney disciplinary panel. A judge should consider whether he/she too is complicit in this fiction and what ramifications there may be for participating.

This is not to say that the prohibition on masking prevents any plea negotiation or potential reduction of charges. It may be that there are genuine factual or legal issues supporting the reduction. Perhaps the officer did not calibrate his speed equipment properly before his shift. The defendant still agrees to plead guilty, so long as the speed is reduced. Perhaps there are legitimate concerns over the legality of a traffic stop that led to a DUI arrest. These would both be legitimate reasons for offering amended charges that might not lead to the conviction being reported in CDLIS.

**THE GEORGIA DEPARTMENT OF DRIVER SERVICES
COURT & LAW ENFORCEMENT INVENTORY REQUEST FORM**

Name Of Court/Enforcement Agency: _____

Shipping Address (NO PO BOX): _____

City: _____

Georgia

Zip Code: _____

Court/Agency Contact Name _____

Date: _____

Court/Agency Contact Number _____

Court/Agency Fax Number _____

Form Number	Title/Description	Revision Date	# Per Pack	Number of Packages Requested	Number of Packages Shipped	Multipart Form
DS-32C	Report of Conviction	Jul-05	250			
DDS-250A	License Surrender Affidavit	Apr-17	100			Yes
DDS-354	Georgia Implied Consent Notice	May-11	100			
DDS-912	Failure to Appear	May-08	200			Yes
DDS-1030 DDS-1189	Official Notice of Habitual Violator Revocation Service by Court or Law Enforcement	Apr-17	100			Yes
DDS-1126	First DUI Conviction Court Affidavit	Nov-16	100			
DDS-1127	Temporary Driving Permit (180 Sticker) <i>100 pages per pack with 4 stickers per page</i>	Mar-11	100			
DS-1137	Juvenile Court Report of Suspension	Oct-05	100			
DDS-1150	Official Notice of Personal Service By Law Enforcement	Apr-17	100			Yes
DDS-1190	Official Notice of Revocation / Suspension Service by Court	Mar-16	100			
DDS-1205	Administrative License Suspension and Implied Consent	May-17	100			Yes
DDS-1205S	Administrative License Suspension and Implied Consent Supplement	Feb-12	100			Yes

FAX REQUEST TO: 678-413-8773

REQUEST ARE SHIPPED THE 4TH WEEK OF EACH MONTH

ORDERS SHOULD NOT EXCEED A TWO (2) MONTH SUPPLY

Driver Services Contact: Tona Harrell tharrell@dds.ga.gov

Contact Number 678-413-8765

Revised: 05/2017



Georgia Department of Driver Services Contact List

All information on this list is CONFIDENTIAL and for Court Personnel only.
The General Public should be referred to the DDS Contact Center at 678-413-8400, 8500 or 8600

Contact Person	Function	Telephone/Fax Number/Email
Kila Johnson, GECPS Program Manager Sharkiran Davis, GECPS Program Manager	Georgia Electronic Conviction Processing System (GECPS): Registration, testing, vendor changes, password updates, error reporting and correction.	Office: 678-413-8434 Office: 678-413-8558 <u>GECPS@dds.ga.gov</u>
Jazzmeen Brewer, Team Lead Court Corrections Customer Service Specialist Rhonda Johnson, Court Corrections Customer Service Specialist Aleeisha Carr, Court Corrections Service Specialist	Questions concerning court corrections via letter or DS-1195 Court Correction Form. <ul style="list-style-type: none"> • Any corrections up to 90 days • 90 to 180 days – Submit according to NISI, 40-13-32 Over 180 days – Only court errors will be processed.	Office: 770-918-5852 Office: 678-413-8478 TBD **Fax: 678-413-8479 Court Corrections DS-1195 form (DDS use only) signed and sealed. Include court fax coversheet.
Records Management	<ul style="list-style-type: none"> • Requests for proof of service MVR and HV packets 	**Fax: 678-413-8460
Records Management	Receives Hard Copies of these forms should be sent via mail: <ul style="list-style-type: none"> • DS 250A – Affidavits for lost license • 1190 – Notice of Suspension (without citations attached) • DDS 0315R – Request for Short Term Approval to File Hardcopy Citations 	Mailing Address Georgia Department of Driver Services Attention: Records Management P.O. Box 80447 Conyers, GA 30013
Tona Harrell, Administrative Operations Coordinator	To request DDS Forms (please fax proper request form)	Office: 678-413-8718 Fax: 678-413-8773 Attention: Tona Harrell
Records Management	DS-912 - Paper Failure to Appear Withdrawals for non-GECPS Courts ONLY FTA Reinstatements ONLY	**Fax: 770-918-6254
Legal Department	For court clerk legal inquiries	Office: 678-413-8765



Court Correction Request
Fax to 678-413-8479

Defendant Information: Last Name: _____

First Name: _____ Middle Name: _____

Date of Birth (MM/DD/YYYY): _____ / _____ / _____

Driver's License (state): _____ (number): _____

Court _____ Telephone # _____

Citation Number _____ (if no citation, use case number)

Original Charge _____ O.C.G.A. § _____

Disposition Date _____ Violation Date _____

Original Disposition: Guilty, Nolo Contendere Bond Forfeiture First Offender

For the above listed case only, please correct the charge (including the new O.C.G.A. Code Section) and/or disposition (if Rule Nisi, include new disposition date) to indicate:

This change is being made pursuant to O.C.G.A. §§ 40-13-32 and 40-13-33 as follows:

- within 90 days of disposition at the court's discretion
- more than 90 days but not more than 180 days after disposition pursuant to the notification and hearing requirements of O.C.G.A. §40-13-32
- to correct a clerical error (at any time)

Court Official Requesting Change (please print): _____

Title of Official Requesting Change (please print): _____

Signature of Requesting Official: _____

Date of Request: _____

REQUEST FOR DRIVER EVALUATION

INSTRUCTIONS:

- 1) Complete this form if you wish for the Department of Driver Services (DDS) to evaluate a driver's ability to drive safely.
- 2) Sign this request in the signature box provided. **Anonymous reports will not be considered.** You may request that your name not be revealed to the individual being reported. Confidentiality will be honored to the fullest extent possible.
- 3) Mail your completed request to : **Georgia Department of Driver Services**
Customer Service, Licensing and Records Division
2206 East View Parkway
Conyers, GA 30013

*The driver does not have to be cited. Please indicate evidence of the incapacity in the area below. If the driver was involved in a traffic accident, attach a copy of the report.

SECTION COMPLETION REQUIRED

Name of Person being reported (First, MI, Last)	Date of Birth or Approximate Age	Telephone Number
Driver License Number	Vehicle License Plate Number, if available	
Street Address	City	State Zip Code

DRIVER CONDITION: Check all appropriate boxes below. Please use the space below to provide specific dates, if known, about the driver's medical (physical or mental) condition such as name of disease or illness, any medications taken, etc.

<input type="checkbox"/> Medical Condition	<input type="checkbox"/> Confused/Disoriented
<input type="checkbox"/> Physical Condition	<input type="checkbox"/> Alcohol/Drug Use (Describe below)
<input type="checkbox"/> Mental/Emotional Condition	<input type="checkbox"/> Blackouts, Seizures, Fainting Spells
<input type="checkbox"/> Vision Condition	<input type="checkbox"/> Needs help with daily activities (i.e. cooking, dressing, bathing etc.)
<input type="checkbox"/> Weakness or Coordination Problems	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Difficulty Walking	

DRIVER BEHAVIOR: Check appropriate boxes for driving problems you have observed (Use space below for additional comments as needed).

<input type="checkbox"/> Does not see or react to other cars, pedestrians etc.	<input type="checkbox"/> Turns in front of on-coming cars
<input type="checkbox"/> Drives in wrong lane	<input type="checkbox"/> Allows car to drift in and out of lane
<input type="checkbox"/> Drives on wrong side of road	<input type="checkbox"/> Backs up or changes lanes without looking back or checking mirrors
<input type="checkbox"/> Acts violent or aggressive when driving	<input type="checkbox"/> Applies brake and gas pedals at the same time
<input type="checkbox"/> Drives too slow, or stops, for no reason	<input type="checkbox"/> Slow reactions that may be caused by medication or drugs
<input type="checkbox"/> Is confused by traffic	<input type="checkbox"/> Drives on sidewalk
<input type="checkbox"/> Has trouble steering, braking or otherwise controlling car	<input type="checkbox"/> Makes driving mistakes while talking to passengers
<input type="checkbox"/> Gets lost or confused while driving near home	<input type="checkbox"/> Falls asleep while driving
<input type="checkbox"/> Fails to react to traffic signals, other cars, or pedestrians	<input type="checkbox"/> Other actions (describe below)
<input type="checkbox"/> Makes turns from wrong lane	

You may use the space below to further describe the driver's condition(s) or action(s) which led you to believe this driver should be evaluated by DDS. Describe any impairment, serious physical injury or illness, mental impairment or disorientation. Describe any traffic law violations whether or not a citation was issued.

The following section must be completed, including a signature and date in order for DDS to initiate an evaluation.

Your relationship to driver (check one):

Relative (Please state exact relationship): _____
 Law Enforcement Officer Physician Caregiver Vision Specialist Other: _____

Check here if you would like to have your name kept confidential. Confidentiality will be honored to the fullest extent possible.

Your Name (Please Print) _____ Daytime Telephone Number _____

Your Mailing Address (City, State, Zip Code) _____

I certify (or declare) under penalty of perjury under the laws of the State of Georgia that the information I have provided is true and correct.

SIGNATURE REQUIRED

DATE REQUIRED

