

DEPARTMENT OF MOTOR VEHICLES

LICENSING OPERATIONS DIVISION

Driver Safety Branch

1377 Fell Street, 2nd Floor

San Francisco, CA 94117-2296

Telephone: (415) 557-1170 FAX: (415) 557-7375



ORDER OF SUSPENSION/REVOCATION

DS290012214

DRIVER LICENSE OR FILE NUMBER
VEHICLE CODE AUTHORITY SECTION
12805 12806 12809 13359 ☒ 13953 ☐ 14252 ☐ 14103
☒ SUSPENSION ☐ REVOCATION

Dave Schwartz, Atty At Law
Po Bx 5604, Santa Rosa, Ca 95402

You are unable to operate a motor vehicle safely because of: a lack of skill.

Your privilege to operate a motor vehicle is withdrawn effective January 27, 2014.

☒ Your ☒ driving test ☐ written test results were unsatisfactory.

☐ Your medical information was not favorable.

☐ You violated the terms and conditions of your probation.

☐

You have the right to request a hearing.

To request a hearing you must contact the department within ☐ 10 days from the date of this order if personally served, or within ☒ 14 days from the mailing date of this order if received by mail. If a hearing is requested, you will be notified by mail of the date, time, and location.

If you do not want a hearing at this time, an interview may be scheduled at a later date upon your request.

For information regarding the hearing process, please see the reverse side of this form.

☒ You may apply in person for an identification card at any DMV field office if you do not already have one. You may make an appointment by visiting the DMV website at: www.dmv.ca.gov or calling our Telephone Service Center at 1-800-777-0133. If a withdrawal action has been taken because of a medical condition, you may obtain an identification card at no cost upon surrender of your unexpired California Driver License.

THIS ACTION IS INDEPENDENT OF ANY OTHER ACTION TAKEN BY THE COURT OR THIS DEPARTMENT

☐ presented to the person named above a true copy of this document.

☒ deposited in the United States mail ☐ at the address shown above, ☒ at Santa Rosa
a true copy of this document, in a sealed envelope, with postage prepaid, addressed to the person as shown on this document; that I am over the age of eighteen years, an employee of the Department of Motor Vehicles at the business address as shown above in the county where the office is located; and that I am not a party to the cause herein mentioned.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

DATE January 23, 2014	NAME OF AUTHORIZED DMV EMPLOYEE N. Rutland	SIGNATURE OF AUTHORIZED DMV EMPLOYEE
--------------------------	---	--

California Relay Telephone Service for the deaf or hearing impaired from TDD Phones: 1-800-735-2929; from Voice Phones: 1-800-735-2922

HEARING INFORMATION
(14100 - 14106 California Vehicle Code)

REQUESTING A HEARING:

You are entitled to a hearing if you contact your local Driver Safety office within 10 days of receiving personal notice of the department's decision or 14 days of the mail date, if received by mail.

A hearing may be requested by telephone, mail, or in person.

NOTE: If you or your representative do not make a presentation at your hearing and no evidence is submitted, the department may sustain the action based upon the evidence held by the department.

You have a right to have the assistance of a sign or language interpreter. If you need assistance, immediately notify this office in order to make arrangements to have an interpreter available at your hearing.

BEFORE THE HEARING YOU MAY:

See or obtain copies of the department's evidence. You are entitled to review and/or obtain copies of the department's records prior to the hearing under the authority of Vehicle Code Section 14104. If you want the information released to someone else, give them signed permission.

Ask the department to issue a subpoena in your behalf if you want a witness present for questioning. You are responsible for serving the subpoena and any related costs required by law.

DURING THE HEARING YOU MAY:

Be represented by counsel or other person.

Present your case and offer relevant evidence.

Question your own and opposing witnesses.

NOTE: Hearings are recorded and all testimony is taken under oath or affirmation.

AFTER THE HEARING YOU MAY:

Request a transcript or tape of your hearing for a fee.

Request a review of your hearing:

- To appeal a hearing decision, you may give or send a written request for a department review to the office where your hearing was held, within 15 days of the effective date of the decision (Vehicle Code Section 14105.5).
- To appeal the department review decision, you must file a writ of mandate in superior court in your county of residence within 90 days of the date the Notice of Decision of Department Review was personally served or 94 days, if mailed (Vehicle Code Section 14401).

More information may be obtained from the DMV website at: <http://www.dmv.ca.gov/>