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DMV
DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1905 LANA AVE NE, SALEM OREGON 97314

HARDSHIP PERMIT APPLICATION

Mail application and all requirements to: DMV, 1905 LANA AVE NE, SALEM OR 97314

- NOT ISSUED FOR COMMERCIAL (CDL) DRIVING PRIVILEGES -

▼ REQUIREMENTS FOR HARDSHIP PERMITS ▼

- **Application** (completed and signed)
- **Fees** Application Fee…….…… $ 75 (**Non-refundable** ORS 807.240(6))
  Reinstatement Fee…….…… $ 85
  TOTAL $160 (Check or money order)

  Renewal Fee – If DMV issues a hardship permit, you must pay a renewal fee ($54) **before the permit expires** to extend the expiration date.
- **SR-22 Insurance Certificate –** Have an automobile insurance company file an Oregon SR-22 certificate with DMV. Must be the original SR-22 (no copies or faxes). DMV will not issue the permit until the SR-22 becomes effective.
- **Employment Verification –** ***If employed, and you need to drive on the job***, submit a letter from your employer verifying employment. The letter must be signed and dated on company letterhead and state both your job duties that require driving and what times and in which counties you must drive to perform those duties.

  If self-employed, submit one of the following: (a) A copy of your current business license (must show your name and business name); (b) A copy of your Schedule C or Schedule SE tax statement; or (c) Two other documents such as a current customer signed business receipt, advertisements, signed contracts, signed and dated letters from customers, etc.

☐ **Seek Employment (valid 120 days) –** Check this box if you are unemployed and need the permit to look for employment. Check the days and list the times and Oregon counties in which you will drive to seek employment.
Hours must be between 8am and 5pm. ☐MON ☐TUE ☐WED ☐THU ☐FRI

Start time: ☐ am ☐ pm End time: ☐ am ☐ pm Counties:

No more than 12 hours of driving time allowed per day in the state of Oregon. **You must sign your name at the end of this application.**

SECTION 1 ▼ DRIVER INFORMATION ▼

NOTE: The address provided may be used for other official purposes, including voter registration.

DRIVER LICENSE / CUSTOMER NUMBER	Do you need to be issued a replacement driver license? ☐ YES ☐ NO	DATE OF BIRTH
FULL LEGAL NAME (Print: last, first, middle)		**CONTACT PHONE NUMBER** ( )

RESIDENCE ADDRESS (Address will be used to update your driver record/license – you **MUST** be an Oregon resident)	**CITY**	**STATE**	**ZIP**
MAILING ADDRESS IF DIFFERENT (Address will be used to update your driver record/license)	**CITY**	**STATE**	**ZIP**

SECTION 2 ▼ DRIVING FOR WORK ▼

Must also submit employment verification if you drive on the job (see Requirements for Hardship Permits section).

NAME OF EMPLOYER, COMPANY, ETC.				Are you self-employed? ☐ YES ☐ NO
WORKSITE ADDRESS	**CITY**	**STATE**	**ZIP**	EMPLOYER PHONE NUMBER ( )
Check work days: ☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN				Mileage to work (one-way):

List Work Shifts (specify am/pm): Do NOT include drive times. DMV will determine and add driving time to your work shifts, depending on mileage listed. Example: If you note your work shift is 7am-3:30pm, DMV will list your drive times as 6am-7am and 3:30pm-4:30pm.

Do you drive employer's vehicle(s)? ☐ YES ☐ NO

Do you drive on the job? ☐ YES* ☐ NO *If yes, employer letter **must** verify you are required to drive on the job.

List counties driven while on the job (counties must connect):

SECTION 3 ▼ ALCOHOL / DRUG / GAMBLING TREATMENT ▼

Driving time for treatment is separate from and not included in the 12-hour driving time limit. Use a separate piece of paper if necessary. NOTE: Requests for several meetings may be denied due to limited space on the permit. Please note preferred meeting first.

Name of meeting:	**Address of meeting:**	**City:**
Check meeting days: ☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN	Time meeting starts: ☐ am ☐ pm	Time meeting ends: ☐ am ☐ pm
Name of meeting:	**Address of meeting:**	**City:**
Check meeting days: ☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN	Time meeting starts: ☐ am ☐ pm	Time meeting ends: ☐ am ☐ pm
Name of meeting:	**Address of meeting:**	**City:**
Check meeting days: ☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN	Time meeting starts: ☐ am ☐ pm	Time meeting ends: ☐ am ☐ pm

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SECTION 4 ▼ NECESSARY SERVICES ▼

Necessary services **only** allow you to drive to and from a grocery store, drive you or your children to and from school or childcare, drive to and from medical appointments, or drive to and from a residence to care for elderly family members. Any family member you drive for necessary services must live in the same household. These drive times count toward your 12-hour driving limit.

DRIVING FOR SCHOOL:

Name of school:	**Address of school:**	**City:**

Check school days (all that apply):
☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN

Start time: ☐ am ☐ pm

End time: ☐ am ☐ pm

DRIVING FOR CHILDCARE:

Name of childcare provider:	**Address of childcare provider:**	**City:**

Check childcare days (all that apply):
☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN

Start time: ☐ am ☐ pm

End time: ☐ am ☐ pm

DRIVING FOR GROCERIES:

Name of (one) grocery store:	**Address of grocery store:**	**City:**

Check grocery shopping day (select one day):
☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN

Time (select one):
☐ 8:00 a.m.–12:00 p.m. **or** ☐ 1:00 p.m.– 5:00 p.m. **or** ☐ 5:00 p.m.– 9:00 p.m.

DRIVING FOR MEDICAL APPOINTMENTS:

Name of medical office:	**Address of medical office:**	**City:**

Check medical appointment days (select two days):
☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN

Time (select one):
☐ 8:00 a.m. – 12:00 p.m. **or** ☐ 1:00 p.m. – 5:00 p.m.

DRIVING FOR ELDERLY CARE:

Name of elderly family member:	**Address of elderly family member:**	**City:**

Check elderly care days (all that apply):
☐MON ☐TUE ☐WED ☐THU ☐FRI ☐SAT ☐SUN

Start time: ☐ am ☐ pm

End time: ☐ am ☐ pm

▼ ADDITIONAL REQUIREMENTS ▼

- **Ignition Interlock Device (IID):** If you are required to install and use an IID as a condition of a DUII Diversion Agreement or DUII conviction, you must submit an installation report verifying you have installed an IID in the vehicle(s) you operate. For a list of IID vendors, go to **https://www.oregon.gov/osp/programs/Pages/Ignition-Interlock-Device-Program.aspx**
- **Medical appointments:** If you are applying to drive yourself or an immediate family member to and from medical treatment required on a regular ongoing basis, you must submit a letter from the physician (or nurse practitioner) verifying the need for regular medical treatment. Along with a physician letter, list the following information:

FAMILY MEMBER NAME (Please print)	FAMILY MEMBER ADDRESS	RELATIONSHIP
PHYSICIAN NAME (Please print)	**PHYSICIAN ADDRESS**	**PHYSICIAN TELEPHONE #**

▼ APPLICANT SIGNATURE ▼

By signing this application, I certify that all documentation and information I provide to DMV is true and correct. I understand it is a crime to knowingly make a false application for driving privileges. The offense is a Class A misdemeanor and is punishable by jail time, a fine or both. DMV will deny, cancel and/or suspend my permit or driver license if I make a false statement or present false documentation.
I must notify DMV in writing if the information on this application changes. If issued, the permit constitutes my consent to abide continuously to all conditions, requirements and restrictions while driving.

APPLICANT SIGNATURE (Full Legal Name)	**DATE**
X	

Hardship permits are subject to the fees, provisions, conditions, prohibitions and penalties applicable to a license, including Oregon residency and no suspensions in any other state. **You may use a separate paper to submit any required or additional information.**

▼ WHAT'S NEXT? ▼

The Driver Sanctions Unit will review your application and notify you of any additional requirements you must complete before DMV can issue a permit. If you have additional requirements and you do not comply with all requirements within **60 days**, DMV will deny your application and you will need to reapply. Reapplying includes submitting all new documents and a new $75 application fee.

Once your application is approved and all requirements are met, DMV will mail you either a hardship permit or a letter instructing you to go to a field office to have the hardship permit and a driver license issued. Your driving privileges are **not** valid until you have obtained both the hardship permit *and* a valid driver license.

Read your hardship permit carefully and only drive within the restrictions listed. You must also maintain any conditions required for your permit such as the SR-22 Insurance Certificate and Ignition Interlock Device throughout the length of the permit.

Please keep a copy of your application and any documents you submit to DMV.