

APPLICATION FOR OCCUPATIONAL OPERATOR LICENSE

(1) Applicant Name - First	MI	Last	Birth Date - Month - Day - Year	Driver License Number	Telephone (7:30 a.m - 5:00 p.m.)
Julie	M	Citizen	mm-dd-yy	C 123-1111-1111-01	715-999-8888

(2) Occupation	Employer	(3) Occupational License Uses - Check ALL Necessary
Clerk	Hugo Gas	<input checked="" type="checkbox"/> Church <input type="checkbox"/> Emergency Service Provider
Groomer	Citizen K/9 Grooming (Self-employed)	<input checked="" type="checkbox"/> Homemaker <input type="checkbox"/> Student at: _____

(4) List all the Counties or States in which you will be driving - Be sure to include your County of Residence

Ashland and Bayfield

Have you enrolled in a Driver Safety Plan? Yes No
 If Yes, be sure to list below the hours you will need to drive to attend.

(5) **Actual Daily Driving Time** - List only the hours you will actually be driving, beginning with the time you start driving and ending when you stop driving. You can legally drive only during the times listed. Do **NOT** exceed 12 hours for any one day and no more than 60 hours for an entire week. Indicate **A** for a.m. and **P** for p.m. Use **12 M** for midnight & **12 N** for noon. Start and Stop times must end in either :00, :15, :30 or :45. For example, if it takes you 35 minutes to go to your place of employment and you start at 10:00 a.m., list your Start as 9:15 a.m. and your Stop as 10:00 a.m. Do **NOT** list hours starting on one day and ending on the next. Example: If you need to drive 10 p.m. - 2 a.m. on Saturday, list your hours as 10 p.m. - 12 midnight on Saturday and 12 midnight to 2 a.m. on Sunday.

Monday				Tuesday				Wednesday				Thursday				Friday				Saturday				Sunday							
Start	A/P of M/N	Stop	A/P of M/N	Start	A/P of M/N	Stop	A/P of M/N	Start	A/P of M/N	Stop	A/P of M/N	Start	A/P of M/N	Stop	A/P of M/N	Start	A/P of M/N	Stop	A/P of M/N	Start	A/P of M/N	Stop	A/P of M/N	Start	A/P of M/N	Stop	A/P of M/N				
9:15	A	10:00	A	3:15	A	3:45	A	9:00	A	5:00	P	3:15	A	3:45	A	6:00	A	12:00	N	6:00	A	11:00	A	12:00	M	2:00	A				
3:00	P	5:00	P	11:30	A	5:00	P	:	:	:	:	11:30	A	5:00	P	6:00	P	10:00	P	11:30	A	12:30	P	7:30	A	10:30	A				
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(6) **Total Driving Time**- Actual driving time cannot be more than 12 hours for any one day and no more than 60 hours for the entire week.

Monday Hours	2:45	Tuesday Hours	6	Wednesday Hours	8	Thursday Hours	6	Friday Hours	10	Saturday Hours	12	Sunday Hours	5
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Applicant Certification - Operating a motor vehicle, at the times and at the locations specified in this application, is necessary for fulfilling the duties of my occupation described above.

(7) Applicant Signature	Date	Total Hours
X Julie M. Citizen	mm-dd-yy	49:45
Circuit Court	Court Signature	Examiner ID
		Court Signature Date