

FORMAL HEARING REQUEST



**Office of the
Secretary of State
DEPARTMENT OF
ADMINISTRATIVE HEARINGS**

Rm. 212, Howlett Building
Springfield, IL 62756
www.cyberdriveillinois.com

Date _____

I hereby request a Formal Hearing pursuant to Section 2-118 of the Illinois Vehicle Code. Enclosed is the **\$50 filing fee**. (See back for fee information.) The purpose of the hearing is to allow me to:

- Contest the suspension or revocation action of the Secretary of State.
- Apply for an Employment Restricted Driving Permit (RDP).
- Apply for a Medical/Support Restricted Driving Permit (RDP).
- Apply for an Educational Restricted Driving Permit (RDP).
- Apply for full reinstatement of driving privileges.
- Alternatively, apply for full reinstatement or an RDP.
- Other: _____

Name		Driver's License Number	
Address			City
State	County	ZIP Code	
Telephone (Home) () (Work) ()			
Date of Birth			

Formal Hearings are held in Chicago, Joliet, Springfield and Mount Vernon. Please mail the Formal Hearing Request Form to the location checked below where you would like a hearing:

- Chicago Office of the Secretary of State
Administrative Hearings Department
17 N. State St., Ste. 1200, 60602
312-793-3722
- Joliet Office of the Secretary of State
Administrative Hearings Department
54 N. Ottawa St., 4th Fl., 60432
815-740-7171
- Springfield Office of the Secretary of State
Administrative Hearings Department
Rm. 212, Howlett Building, 62756
217-782-7065
- Mount Vernon Office of the Secretary of State
Administrative Hearings Department
218 S. 12th St., 62864
618-242-8986

Please indicate preference: a.m. p.m. Number of miles from home to hearing location: _____

Petitioner's signature: _____

NOTE: If you will have an attorney representing you, please attach his/her business card.

