



State of Utah

DEPARTMENT OF PUBLIC SAFETY
DRIVER LICENSE DIVISION

When completed please
Fax this form to the
DUI Section.
(801) 964-4499

Gary Herbert
Governor

Nannette Rolfe
Director

D. Lance Davenport
Commissioner

P.O. Box 144501
Salt Lake City, Utah 84114-4501
(801) 965-4437 Fax: (801) 964-4499

Date: _____

Hearing Request

I would like to request a hearing regarding my DUI Arrest.

Full Name: _____

Driver License Number: _____

Social Security Number: _____

Address: _____

City, State & Zip Code: _____

Phone Number: (Enter Ten Digits) _____

Date of Birth: (mm/dd/yy) _____

Date of Arrest: (mm/dd/yy) _____

Citation Number: _____

County of Arrest: _____

Attorney: _____

Attorney Address: _____

Attorney City, State & Zip Code: _____