

Applicant

DUI Administrative Hearing Fee Waiver Additional Eligibility Determination

Include this form as additional documentation to apply for financial assistance with the cost of the administrative fee for a DUI hearing on the suspension or revocation of your driver license if none of the eligibility requirements found on the DUI Administrative Hearing Fee Waiver Application (form 525-010) apply.

You must submit this completed form and all other required documents with your <u>DUI Administrative</u> <u>Hearing Fee Waiver Application</u> (form 525-010) if you are submitting proof for additional eligibility determination.

For more information on the DUI Administrative Hearing Fee Waiver, visit dol.wa.gov.

PRINT OR TYPE Name (Last, First, Middle initial)	Driver license number		State
Additional eligibility qualifications—Appli will not be returned.	cations without required proof will be denied	d. Attach	nments
Answer the following			
1. Total number of persons in your household (in	clude yourself)		
2. Do you live with your parent/guardian?		Yes	No
3. Monthly Income— Submit proof of income, surrecent federal tax return, or W-2s. If you have signed written statement explaining this.	no income or don't have proof, attach a		
	oay	\$	
b. Contribution from any family member or oth helping with your basic living costs	er person living in the household who is	\$	
c. Interest, dividends, or other income		\$	
d. Pensions, annuities, social security and/or	oublic assistance	\$	
I declare under penalty of perjury under the law of the Department of Licensing to verify all information		ect. I au	thorize
Date and place (city or county) signed	Applicant signature		

RCW 10.101.010; 46.20.308

For Department Use Only

Approved Denied By______