

Special Restricted Driver's License Application Form

You may apply for a **Restricted License** if the following requirements have been met:

1. You have served the length of prohibition as required by the **Court Order**. This is the prohibition period that a judge has set for you. This prohibition is set under the Criminal Code of Canada and is separate and distinct from any statutory suspension under Saskatchewan's provincial legislation.
2. You have completed the **Driving Without Impairment (DWI)** course, and educational program, or you have completed mandatory in-take **Addictions Screening** and a program as prescribed by an alcohol and drug services counselor and are considered low risk for continued impaired driving.
3. You have completed your **Mandatory Ignition Interlock** term and still must serve the provincial suspension (This **ONLY** applies to alcohol/drug related convictions).
4. You have paid the \$175 **Restricted License Application Fee** (at any motor license issuer) and have included a copy of that receipt with this application form.

Application Requirements:

1. **Complete** the **Special Restricted Driver's License Application Form**.
2. **Send** your application and a copy of your **Restricted License Application Fee receipt** to the Highway Traffic Board by:
 - a. MAIL Highway Traffic Board
1621A McDonald Street
REGINA SK S4N 5R2
 - b. EMAIL contactus.htb@gov.sk.ca
 - c. FAX 306-798-0162
3. If you have any questions, please call the HTB toll free at 1-855-775-8336.

Highway Traffic Board Application Review Process

1. The Highway Traffic Board (HTB) staff will review your application to confirm eligibility to apply for a **Special Restricted License** and to ensure the application is complete.
2. You will be scheduled to appear before the HTB members for a hearing.
3. Before granting restricted driving privileges the Board must be satisfied that:
 - a. You and/or your family is/are experiencing **exceptional hardship** as a result of the suspension, and
 - b. Your request for driving privileges is not contrary to the public's best interest.
4. Before rendering a decision, the HTB will consider information provided in the application, verbal testimony provided at the hearing and any other relevant written or oral information provided (example: letters of reference or support)

Decision

1. After your appeal has been heard, the HTB members have the authority to grant the restricted license or to deny the application for a restricted license.
2. You will receive either an email or a letter via mail with the hearing results.
3. If successful, you must visit an SGI motor license issuer to purchase a driver's license or a reprint of your driver's license that contains the special restrictions.
4. If unsuccessful, your license will remain suspended until you are eligible for a full driver's license.
5. Decisions reached by the HTB with regards to your appeal are final and binding.

PLEASE ANSWER AND COMPLETE THE QUESTIONS ON THE FOLLOWING PAGES AND RETURN TO THE HTB AS INSTRUCTED.

It is important to print clearly and provide current and accurate information for your hearing. Incomplete applications will be returned, which may cause delays in processing.

**IN APPLYING FOR THIS SPECIAL RESTRICTED DRIVER'S LICENSE, I UNDERSTAND:
(Please read carefully)**

I am only being allowed to do so because of the **exceptional hardship**, my family or I would endure if the complete suspension of my driving privileges were to continue.

The restricted driver's license is only to provide me with the **absolute minimum** of driving privileges to avoid exceptional hardship during my suspension period.

I have carefully thought out and considered alternative arrangements for transportation (who/what, where, when, how, and why)

This application form is not a driver's license. If I am granted permission to drive, a motor license issuer must first validate the restricted license.

4. Are you employed? Yes _____ No _____

If employed, the name of the Company/Business is _____

Street Address _____ City/Town _____

Province _____ Supervisor _____

5. Current employment information

a. What are your employment responsibilities in relationship to driving?

b. Do you drive a company vehicle? Yes _____ No _____

c. How far do you live from your place of employment?

d. Is this seasonal employment? Yes _____ No _____ If yes, explain below.

e. How have you been getting to and from work while you have been suspended?

f. Please provide any other employment information you feel is relevant, or if you have a second place of employment, provide the company name, location and responsibilities.

6. Do you have serious medical issues that require frequent trips for treatments, tests, or appointments that you would like to be able to drive to and from? If yes, Describe.

How have you been getting to and from these appointments while you have been suspended?

7. Are you attending school or another educational institution? No ____ Yes ____
If you answered yes, provide the details.

Name of school/institution _____

Street Address _____ City _____ Prov _____

Provide information regarding your driving responsibilities with school and how have you been getting to school while you have been suspended.
