STATE OF WISCONSIN, _____ **CIRCUIT COURT,** _____ **JEFFERSON COUNTY**

State of Wisconsin	**Petition to Exempt Vehicles,**
	Financial Disclosure and Order
-vs-	

_____   **Case No.** _____
_____

Statutory reference: 343.301(1m) - _If equipping each motor vehicle with an ignition interlock device under_ <u>sub. (1g)</u> _would cause an undue financial hardship, the court may order that one or more vehicles described under_ <u>sub. (1g)</u> _not be equipped with an ignition interlock device._

☐ **UNDER OATH, I STATE THAT equipping each motor vehicle with an ignition interlock device as ordered in the above captioned case would cause an undue financial hardship. I ask the Court to exempt the following vehicles from the ignition interlock requirement.**

Year	**Make**	**Vehicle ID Number (VIN)**	**License Plate #**

_____
_____
_____

☐ **UNDER OATH, I STATE THAT an Ignition Interlock device will be installed on the following vehicle(s)**

Year	**Make**	**Vehicle ID Number (VIN)**	**License Plate #**

_____
_____

> Complete Section 1 if you receive aid from any of the programs listed. If you do not receive aid, complete Section #2.

SECTION 1.

I currently receive:

☐ Supplemental security income.   ☐ Relief funded under §59.53(21), Wis. Stats. ☐ Medical assistance.

☐ Food stamps/FoodShare.   ☐ Relief funded under public assistance.

☐ Benefits for veterans under §45.40(1) or 38 USC 501-562.

☐ Legal representation from a civil legal services program or a volunteer attorney program based on indigency.
Name of program: _____

☐ Other means-tested public assistance: _____

My financial situation ☐ has ☐ has not changed since I became eligible for this program.

If you checked the "has" box, and such changes would make you ineligible for the program(s) if you applied today, you must complete Section 2.

SECTION 2.

1. I   ☐ am   ☐ am not married.

2. I   ☐ am   ☐ am not employed. Name of employer: _____

3. I earn (gross pay) $_____ ☐ weekly.   ☐ every 2 weeks.   ☐ twice monthly.   ☐ monthly.
My take-home pay (after taxes and deductions) is $_____ per pay period.

4. I receive gross monthly income totaling the amount of $_____ from
☐ Pension   ☐ Social security   ☐ Unemployment compensation
☐ Disability   ☐ Student loans/grants   ☐ Other: _____

5. I have the following cash assets:
☐ Savings accounts: $ _____   ☐ Cash: $ _____
☐ Checking accounts: $ _____   ☐ Money owed me: $ _____

6. I have the following other assets:

□ Vehicle-Yr./Make:_____ $_____   □ Household furnishings: $_____
□ Vehicle-Yr./Make:_____ $_____   □ Equity in real estate: $_____
□ Other individual assets valued over $200 each:_____ $_____

7. My household consists of myself and _____ others:

Full name: _____ Relationship to me: _____ Under age 18   Yes No
Full name: _____ Relationship to me: _____ Under age 18   Yes No
Full name: _____ Relationship to me: _____ Under age 18   Yes No
Full name: _____ Relationship to me: _____ Under age 18   Yes No
Full name: _____ Relationship to me: _____ Under age 18   Yes No

8. Other members of my household have gross monthly income totaling the amount of $_____ from

□ Wages   □ Social security   □ Relief funded under public assistance   □ Food stamps/FoodShare
□ Pension   □ Student loans/grants □ Unemployment compensation   □ SSI
□ Disability   □ Relief funded under §59.53(21), Wisconsin Statutes   □ Support/maintenance
□ Other: _____

9. I have the following debts: Amount   Monthly Payment
        a. Mortgage/Rent $ _____ $_____
        b. Auto loan $ _____ $_____
        c. Credit cards $ _____ $_____
        d. Other: $ _____ $_____

10. I have the following unusual expenses, other than ordinary living expenses:
_____
_____

11. Other Explanation:
_____
_____

UNDER OATH I STATE THAT THE ABOVE INFORMATION IS TRUE AND CORRECT. I understand that if my financial situation changes significantly, I must notify the court immediately.

State of Wisconsin, County of Jefferson
Subscribed and sworn to before me on _____   _____
                                                        Signature   Date
_____
Notary Public/Court Official   _____
My commission/term expires: _____   Address

THE COURT FINDS AND ORDERS:

□ The petition is GRANTED because the Court finds that requiring equipment of all vehicles would cause an undue financial hardship. Further, the Court orders that the requested vehicles be exempt from the ignition interlock requirements. Clerk to prepare form MV3617 and forward a copy to the Department of Transportation.

□ The Petition is DENIED because the Court finds that:
        □ the Defendant is not indigent.
        □ Other: _____

_____
Circuit Court Judge   Date