

DRIVERS LICENSE REINSTATEMENT PROGRAM (DLRP) AGREEMENT

By signing below, I am agreeing to make payments as I have indicated on the payment option page. I acknowledge and understand that failure to pay the agreed upon amount **every month on time** may result in a re-suspension of my license and that if my license becomes suspended again due to non-compliance with this payment plan I may lose my eligibility for the DLRP-CAPP program.

I acknowledge and understand that this payment plan DOES NOT impact the terms of my probation. Failure to pay my financial obligations in **FULL**, before my probation expires, may result in an application to revoke my probation.

I further acknowledge and understand that this agreement will NOT prevent the offset of a tax refund and the offset of a tax refund will NOT replace the payments required by this agreement.

Defendant's Signature

Date

Street address

City/State/Zip

Current Phone Number

Current Email

After we receive your paperwork and payment, we will send a confirmation letter to the Clerk of Court in Poweshiek County notifying them of your payment plan and ask them to release that information to the Iowa DOT so that your license may be restored.

- **IT IS YOUR RESPONSIBILITY TO CONTACT THE IOWA DOT (1-800-532-1121) AND VERIFY THAT YOU ARE ELIGIBLE TO GO AND GET A VALID LICENSE.**
 - *IT USUALLY TAKES 14-21 DAYS FROM THE DATE WE RECEIVE YOUR SIGNED PAPERWORK AND PAYMENT BEFORE THE DOT WILL HAVE EVERYTHING IN THEIR SYSTEMS UPDATED AND WILL BE ABLE TO GIVE YOU THE VERIFICATION THAT YOU ARE ELIGIBLE TO GET A VALID LICENSE *
- This payment plan does **NOT** cover any new citations that you may receive or any citations that you have received in the past but are not currently suspending your license.

*You **MUST** notify our office **IMMEDIATELY** of any changes in address or employment *