STATE OF TEXAS DEPARTMENT OF PUBLIC SAFETY SAFETY RESPONSIBILITY PO BOX 15999 AUSTIN, TX 78761-5999

APPLICATION FOR REINSTATEMENT OF DRIVER'S LICENSE AND REGISTRATION UNDER THE SAFETY RESPONSIBILITY ACT

	Case No.
The undersigned	
being duly sworn deposes and says:	
That he was involved in a mot	or vehicle accident on
	(Month/ Day/Year)
in or near	, Texas, and as a result of said accident and softhe Safety Responsibility Act, an Order of Suspension was
duly issued, effective on	, suspending his privileges of operating or nth/Day/Year)
	motor vehicle and any drivers license and all registration receipts vilege of having any such license issued to him or of having any in the future.
That two years have elapsed	following such accident:
That there are no unpaid judg from the above described accident;	ments against the owner or operator of the motor vehicle arising
That to officially knowledge on	d belief there are no actions begun within two years of the data
<u> </u>	d belief, there are no actions begun within two years of the date of the State of Texas against the owner or operator of the motor bed accident;
	this affidavit as proof to the Texas Department of Public Safety reinstatement of his driver's license and registration privileges afety Responsibility Act.
Siç	gned
Ad	dress
Cit	State
Cit	y State
	teDriver License #
Subscribed and sworn to before me	this, day of, (Year)
	(Year)
A \$100.00 REINSTATEMENT	r
FEE IS REQUIRED WHEN FILED	Notary Public in and for
	, County, Texas

SR-60 (Rev. 9/99)