

APPLICATION FOR EXEMPTION FROM NIGHT-TIME DRIVING RESTRICTION

APPLICANT	
Full Name _____	_____
Address _____	Postal Code _____
ID # _____	Tel # _____ (residence) Tel # _____ (business)
Occupation _____	Distance from place of residence to work location _____

Request exemption during the following times:

- | | |
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| <input type="checkbox"/> Monday 1:00 a.m. to: _____ a.m.
<input type="checkbox"/> Tuesday 1:00 a.m. to: _____ a.m.
<input type="checkbox"/> Wednesday 1:00 a.m. to: _____ a.m.
<input type="checkbox"/> Thursday 1:00 a.m. to: _____ a.m. | <input type="checkbox"/> Friday 1:00 a.m. to: _____ a.m.
<input type="checkbox"/> Saturday 1:00 a.m. to: _____ a.m.
<input type="checkbox"/> Sunday 1:00 a.m. to: _____ a.m. |
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CERTIFICATION BY EMPLOYER			
I hereby certify that I require the services of the applicant herein during the times as indicated above.			
Employer _____	Employer's Signature _____	Date _____	Telephone # _____
Employer's Address _____		Expiry Date _____	
The applicant is also required to drive during their shift as part of their regular employment duties: <input type="checkbox"/> Yes <input type="checkbox"/> No			

PARENT/GUARDIAN CONSENT		
If the applicant is under 18 years of age, parental or guardian consent must be given.		
Parent/Guardian Signature _____	Date _____	Telephone # _____

CONDITIONS
This application is subject to the following conditions, as prescribed by regulations made pursuant to Section 69 (1) of the <i>Highway Traffic Act</i> .
A newly licensed driver who has been granted an exemption may operate a vehicle between 1:00 a.m. and 5:00 a.m. subject to one or more of the following conditions imposed by the Department:
<ul style="list-style-type: none"> a. There shall be no passengers in the vehicle; b. Proof of the exemption must be carried with the newly licensed driver's driver's licence c. Proof of the exemption must be displayed on the demand of a peace officer; d. This exemption only permits the operation of a vehicle for purposes of travel to and from the workplace and is limited to the most direct route between the newly licensed driver's residence and workplace. e. Any other exemption the Registrar may grant.

APPLICANT DECLARATION	
I hereby certify that the information contained on this form is correct and that I have read, understand and accept the conditions listed above and those prescribed by regulations made pursuant to Section 69 (1) of the <i>Highway Traffic Act</i>	
Applicant's Signature _____	Date _____

INSTRUCTIONS
Return completed application to your local Access PRINCE EDWARD ISLAND office. <i>(There is no fee.)</i> The Exemption Permit will be mailed to the applicant.