Reset

FORMAL HEARING REQUEST

Office of the Secretary of State
DEPARTMENT OF ADMINISTRATIVE HEARINGS
Rm. 212, Howlett Building
Springfield, IL 62756
ilsos.gov

Date: _____

I hereby request a formal hearing pursuant to Section 2-118 of the Illinois Vehicle Code. Enclosed is a **$50 check for the filing fee.** The purpose of the hearing is to allow me to:

- ☐ Contest the suspension, revocation or cancellation action of the Secretary of State.
- ☐ Apply for a Restricted Driving Permit (RDP).
- ☐ Apply for reinstatement of driving privileges.
- ☐ Alternatively, apply for reinstatement or an RDP.
- ☐ Contest the re-suspension or extension of the statutory summary suspension under the Monitoring Device Driving Permit (MDDP) Program.
- ☐ Other: _____

Name		Driver's License Number
Address		City
State	County	ZIP
Telephone (Home) ( )	(Work) ( )	(Cell) ( )
Date of Birth	Email Address	

Please check below and mail this form to the location where you would like a formal hearing:

☐ Chicago: Office of the Secretary of State
Administrative Hearings Department
17 N. State St., Ste. 1200, 60602
312-793-3722

☐ Springfield: Office of the Secretary of State
Administrative Hearings Department
Rm. 212, Howlett Building, 62756
217-782-7065

☐ Joliet: Office of the Secretary of State
Administrative Hearings Department
54 N. Ottawa St., 4th Fl., 60432
815-740-7171

☐ Mount Vernon: Office of the Secretary of State
Administrative Hearings Department
218 S. 12th St., 62864
618-242-8986

Please indicate preference: ☐ a.m. ☐ p.m. Number of miles from home to hearing location: _____
Requests are scheduled based on availability. Your preference is not guaranteed.

A hearing request must be accompanied by a **$50 filing fee.** The fee must be submitted in the form of a check or money order payable to the Secretary of State. CASH IS NOT ACCEPTED. Please mail this form, along with the filing fee, to the location where you would like a hearing. If a hearing request is received without the filing fee, the form will be returned and a hearing will not be scheduled. This fee is **non-refundable** in accordance with Section 2-118 of the Illinois Vehicle Code and 92 Illinois Administrative Code 1001.70.

All out-of-state petitioners, except those with lifetime revocations, and Illinois residents who are temporarily residing outside Illinois, may apply for reinstatement in Illinois by obtaining, completing and submitting an Out-of-State Resident Reinstatement Application instead of returning to Illinois for a formal hearing. For information on obtaining the application, please call 217-782-7065 or visit **ilsos.gov.**

By providing the Secretary of State with your email address, you hereby agree to receive notification of the time, date and location of your hearing and/or final decision by electronic transmission.

NOTE: Because your internet service provider or email program may use a type of spam filter, it is suggested that you add our email address (ahsupportservices@ilsos.gov) to your trusted list of senders, contacts and/or address book. Please check your email inbox and/or other folder/spam folders periodically.

Petitioner's Signature Email Address Date

Printed by authority of the State of Illinois. January 2022 — 1 — DAH H 12.33